DATE: 10-30-04

REPLY TO
ATTN OF: (b)(7)c Visiting Room Officer

SUBJECT: Visitor denied entrance to Visiting Room

TO: Captain
THRU: Operations Lieutenant

On the above date, at 8:40 (a.m.), the following visitor (Mr./Mrs./Miss)______ was denied entrance into the Visiting Room.

Reason for denial: 1. Improper or no identification
2. Not on inmate's visiting list
3. Under age or without parent/guardian
4. Other Two Positive Tests on Ion Machine

Comments:


CC: Institution Duty Officer
MEMORANDUM FOR J. MOORHEAD, CAPTAIN

DATE: 10-30-04

SUBJECT: Positive ION TRACK Test Result

On 10-30-04 (date), at approximately 8:38:44 (time), an electronic scan for contraband, using the Ion Track Electronic Drug Detection System, was conducted on (b)(6) (visitor name), who attempted to visit inmate (b)(6) The test was positive for the presence of Amphetamine. A follow-up test revealed the presence of Amphetamine.

This is the ( ) 1st, ( ) 2nd, ( ) 3rd, ( ) 4th Positive test result for this visitor.

Dates of previous positive test results: __________________________

____________________

The visitor will be allowed to return to the institution:

$48 hours Date __________________________

( ) 30 days Date __________________________

( ) 90 days Date __________________________

( ) 180 days Date __________________________

Attached is the Title 18 (Visiting Form), the Ion Track printout receipt, and the Sample Trap used for testing.
BP-S224.022 NOTIFICATION TO VISITOR CDFRM
MAY 99
U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF PRISONS

Date: 10/30  Time: AM  Officer's Name: ____________

Institution: USP ATL

Name of Inmate To Be Visited: ____________

It is a Federal crime to bring upon the institution grounds any firearm, destructive device, ammunition, other object designed to be used as a weapon, narcotic drug, controlled substance, alcoholic beverage, currency, or any other object that threatens the order, discipline, or security of a prison, or the life, health, or safety of an individual without the knowledge and consent of the Warden. 18 U.S.C. §§ 1791 and 3571 provides a penalty of imprisonment for not more than twenty years, a fine of not more than $250,000 or both, to a person who provides, or attempts to provide, to an inmate any prohibited object. All persons entering upon these premises are subject to routine searches of their person, property (including vehicles), and packages. The Warden, upon reasonable suspicion that a person may be introducing contraband or demonstrating actions that might otherwise endanger institution safety, security, or good order, may request the person, as a prerequisite to entry, to submit to a visual search, pat search, urine surveillance test, breathalyzer test, or other comparable test. A visitor has the option to refuse any of the search or test or entrance procedures, with the result that the visit will not be permitted entry to the institution.

NOTE: Your refusal of these procedures means that you will not be permitted entry to the institution, and you will be allowed to leave the institution premises, unless there is a reason to detain and/or arrest you. The use of cameras or recording equipment without permission of the Warden is strictly prohibited; violators are subject to criminal prosecution. Once a visit with an inmate begins, if a visitor leaves the visiting area, the visit will be terminated. Any exception must be approved by the visiting room officer.

PLEASE ANSWER THE FOLLOWING QUESTIONS: Are any of the following items in your possession, or in possession of children in your party under 16 years of age?

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firearms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Explosives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weapons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ammunition</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Metal Cutting tools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recording Equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Narcotics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marijuana</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Camera</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food Items</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcoholic Beverages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prescription Drug*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*All types of medication carried must be listed in the following space, and must be left at the entry area:

I have read, I understand, and I agree to the above. If I am visiting with an inmate, I also understand and agree to abide by the visiting guidelines provided me by this institution. I declare that I do not have articles in my possession which I know to be a threat to institution safety, security, or good order. I am aware that if I have questions about what is authorized, I should consult with the officer. I am aware that the penalty for making a false statement is a fine of not more than $250,000 or imprisonment of not more than five years or both (pursuant to 18 U.S.C. § 1001). I am aware that the visiting area, may be monitored by video.

Printed Name/Signature: ____________

Street Address/City: ____________

Vehicle License No.: ____________

If visiting with an inmate, I am responsible:

If not visiting with an inmate, please indicate:

Name of Organization: ____________

Purpose of Visit: Social

Printed Name/Signature of Staff Witness: ____________

This form may be replicated via WP

(b)(7)c

(b)(6)

(b)(7)c

Replaces BP-224(52) of Jul 95
DATE: 10/24/04

REPLY TO ATTN OF:

SUBJECT: Visitor denied entrance to Visiting Room

TO: Captain
THRU: Operations Lieutenant

On the above date, at 10:00 a.m., the following visitor (Mr./Mrs./Miss) was denied entrance into the Visiting Room.

Reason for denial: 1. Improper or no identification
2. Not on inmate's visiting list
3. Under age or without parent/guardian
4. Other [D]R[AGS D][E][T][E][C][T][E][D]

Comments: Child 13 years old - tested twice - positive on ion test.

CC: Institution Duty Officer
MEMORANDUM FOR J. MOORHEAD, CAPTAIN

DATE: 10-24-04

SUBJECT: Positive ION TRACK Test Result

On 10-24-04 (date), at approximately 10:30 AM (time), an electronic scan for contraband, using the Ion Track Electronic Drug Detection System, was conducted on (b)(6) (visitor name), who attempted to visit inmate (b)(6). The test was positive for the presence of COCAINE. A follow-up test revealed the presence of COCAINE.

This is the ( ) 1st, (x) 2nd, ( ) 3rd, ( ) 4th Positive test result for this visitor.

Dates of previous positive test results: ________________________________

_________________________ ________________

_________________________ ________________

The visitor will be allowed to return to the institution:

( ) 48 hours Date 10/26/04

( ) 30 days Date ____________________

( ) 90 days Date ____________________

( ) 180 days Date ____________________
### Drugs Detected

**User:** Operator 1  
**Date:** 10/24/04 15:59:37 AM  
**Serial #:** 09039408067 ALM00468.sca  
**Version:** 8.05

<table>
<thead>
<tr>
<th>Substance Detected</th>
<th>Time</th>
<th>Height</th>
<th>Ion Peaks</th>
<th>Time</th>
<th>Height</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>COCAIN</strong></td>
<td>7.536</td>
<td>141</td>
<td>3.199</td>
<td>1665</td>
<td>3.564</td>
</tr>
<tr>
<td></td>
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<td></td>
<td>4.013</td>
<td>1384</td>
<td>3.573</td>
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<td></td>
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<td></td>
<td>5.020</td>
<td>389</td>
<td>6.027</td>
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<td></td>
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<td>7.489</td>
<td>965</td>
<td>7.966</td>
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<td></td>
<td></td>
<td></td>
<td>8.410</td>
<td>621</td>
<td>10.963</td>
</tr>
</tbody>
</table>

**Ion Peaks:**
- COCAINE: 7.536 141
- **COCAIN:**
  - 3.199 1665 3.564 425
  - 4.013 1384 3.573 420
  - 5.020 389 6.027 210
  - 7.489 965 7.966 1580
  - 8.410 621 10.963 1057

### Notes
- **Software Version:** 8.05
- **Time:** 10/24/04 10:59:37 AM
- **Last Call:** 10/24/04 7:40:10 AM
- **Serial #:** 09039408067 ALM00468.sca
- **Mode:** Dual
- **Sample Time:** 7.0 (s)
- **Warnings:** AM NO3

### Detector Temp: 220
- **CORNOX:** 7.936 8.907 -0.04 0.04 750 Pos
- **HEROIN:** 7.909 5.875 -0.04 0.04 750 Pos
- **TAC:** 7.906 6.771 -0.04 0.04 750 Pos
- **METHAM:** 8.030 6.509 -0.04 0.04 750 Pos
- **AMPHEL:** 7.750 6.453 -0.04 0.04 750 Pos
- **MDMA:** 6.490 7.284 -0.04 0.04 750 Pos
- **MDA:** 6.320 7.093 -0.04 0.04 750 Pos
- **MORPH:** 7.569 8.949 -0.04 0.04 750 Pos
- **Temaz:** 7.775 8.726 -0.04 0.04 750 Pos
- **Amph-Suff:** 7.775 8.726 -0.04 0.04 750 Pos

### File Name: ALM00468.sca

**Names:**
- **TNT:** 6.070 6.736 -0.04 0.04 750 Neg

**Notes:**
- **Software Version:** 8.05
- **Time:** 10/24/04 10:59:37 AM
- **Last Call:** 10/24/04 7:40:10 AM
- **Serial #:** 09039408067 ALM00468.sca
- **Mode:** Dual
- **Sample Time:** 7.0 (s)
- **Warnings:** AM NO3

### Detector Temp: 220
- **CORNOX:** 7.936 8.907 -0.04 0.04 750 Pos
- **HEROIN:** 7.909 5.875 -0.04 0.04 750 Pos
- **TAC:** 7.906 6.771 -0.04 0.04 750 Pos
- **METHAM:** 8.030 6.509 -0.04 0.04 750 Pos
- **AMPHEL:** 7.750 6.453 -0.04 0.04 750 Pos
- **MDMA:** 6.490 7.284 -0.04 0.04 750 Pos
- **MDA:** 6.320 7.093 -0.04 0.04 750 Pos
- **MORPH:** 7.569 8.949 -0.04 0.04 750 Pos
- **Temaz:** 7.775 8.726 -0.04 0.04 750 Pos
- **Amph-Suff:** 7.775 8.726 -0.04 0.04 750 Pos

### File Name: ALM00467.sca

**Names:**
- **TNT:** 6.070 6.736 -0.04 0.04 750 Neg

**Notes:**
- **Software Version:** 8.05
- **Time:** 10/24/04 10:57:45 AM
- **Last Call:** 10/24/04 7:40:10 AM
- **Serial #:** 09039408067 ALM00467.sca
- **Mode:** Dual
- **Sample Time:** 7.0 (s)
- **Warnings:** AM NO3

### Detector Temp: 220
- **CORNOX:** 7.936 8.907 -0.04 0.04 750 Pos
- **HEROIN:** 7.909 5.875 -0.04 0.04 750 Pos
- **TAC:** 7.906 6.771 -0.04 0.04 750 Pos
- **METHAM:** 8.030 6.509 -0.04 0.04 750 Pos
- **AMPHEL:** 7.750 6.453 -0.04 0.04 750 Pos
- **MDMA:** 6.490 7.284 -0.04 0.04 750 Pos
- **MDA:** 6.320 7.093 -0.04 0.04 750 Pos
- **MORPH:** 7.569 8.949 -0.04 0.04 750 Pos
- **Temaz:** 7.775 8.726 -0.04 0.04 750 Pos
- **Amph-Suff:** 7.775 8.726 -0.04 0.04 750 Pos
DATE: 10-24-04

REPLY TO
ATTN OF: 

SUBJECT: Visitor denied entrance to Visiting Room

TO: Captain

THRU: Operations Lieutenant

On the above date, at ______, the following visitor (Mr./Mrs./Miss. ______) was denied entrance into the Visiting Room ______.

Reason for denial:
1. Improper or no identification
2. Not on inmate's visiting list
3. Under aggravated

Inmate Concerned

Institution Duty Officer

UNITED STATES GOVERNMENT
MEMORANDUM
United States Penitentiary, Atwater, CA
MEMORANDUM FOR J. MOORHEAD, CAPTAIN

DATE: 10-24-04

SUBJECT: Positive ION TRACK Test Result

On 10-24-04 (date), at approximately 8:40 AM (time), an electronic scan for contraband, using the Ion Track Electronic Drug Detection System, was conducted on (b/6) (visitor name), who attempted to visit inmate (b/6)
The test was positive for the presence of AMPHETAMINE. A follow-up test revealed the presence of AMPHETAMINE.

This is the ( ) 1st, (x) 2nd, ( ) 3rd, ( ) 4th Positive test result for this visitor.

Dates of previous positive test results:

________________________________________________________________________

________________________________________________________________________

The visitor will be allowed to return to the institution:

(x) 48 hours  Date 10/24/04

( ) 30 days Date

( ) 90 days Date

( ) 180 days Date

Attached is the Title 18 (Visiting Form), the Ion Track printout receipt, and the Sample Trap used for testing.
BP-S224.022 NOTIFICATION TO VISITOR CDFRM
MAY 99
U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF PRISONS

Date: 10-24-01 Time: 8:20 PM Officer's Name: (b)(6)
Institution: USF ATWATER Location: ATWATER, CALIFORNIA
Name of Inmate To Be Visited: (b)(7)c

It is a Federal crime to bring upon the institution grounds any firearm, destructive device, ammunition, other object designed to be used as a weapon, narcotic drug, controlled substance, alcoholic beverage, currency, or any other object that threatens the order, discipline, or security of a prison, or the life, health, or safety of an individual without the knowledge and consent of the Warden. 18 U.S.C. §§ 1791 and 3571 provides a penalty of imprisonment for not more than twenty years, a fine of not more than $250,000 or both, to a person who provides, or attempts to provide, to an inmate any prohibited object. All persons entering upon these premises are subject to routine searches of their person, property (including vehicles), and packages. The Warden, upon reasonable suspicion that a person may be introducing contraband or demonstrating actions that might otherwise endanger institution safety, security, or good order, may request the person, as a prerequisite to entry, to submit to a visual search, pat search, urine surveillance test, breathalyzer test, or other comparable test. A visitor has the option to refuse any of the search or test or entrance procedures, with the result that the visitor will not be permitted entry to the institution.

NOTE: Your refusal of these procedures means that you will not be permitted entry to the institution, and you will be allowed to leave the institution property, unless there is a reason to detain and/or arrest you. The use of cameras or recording equipment without permission of the Warden is strictly prohibited; violators are subject to criminal prosecution. Once a visit with an inmate begins, if a visitor leaves the visiting area, the visit will be terminated. Any exception must be approved by the visiting room officer.

PLEASE ANSWER THE FOLLOWING QUESTIONS. Are any of the following items in your possession, or in possession of children in your party under 16 years of age?

- **Firearms**
  - Yes □ No X
- **Explosives**
  - Yes □ No X
- **Weapons**
  - Yes □ No X
- **Ammunition**
  - Yes □ No X
- **Metal Cutting tools**
  - Yes □ No X
- **Recording Equipment**
  - Yes □ No X
- **Cellular Phone**
  - Yes □ No X
- **Narcotics**
  - Yes □ No X
- **Marijuana**
  - Yes □ No X
- **Camera**
  - Yes □ No X
- **Food Items**
  - Yes □ No X
- **Alcoholic Beverages**
  - Yes □ No X
- **Prescription Drug**
  - Yes □ No X

*All types of medication carried must be listed in the following space, and must be left at the entry area:

I have read, I understand, and I agree to the above. If I am visiting with an inmate, I also understand and agree to abide by the visiting guidelines provided by this institution. I declare that I do not have any articles in my possession which I know to be a threat to institution safety, security, or good order. I am aware that if I have questions about what is authorized, I should consult with the officer. I am aware that the penalty for making a false statement is a fine of not more than $250,000 or imprisonment of not more than five years or both (pursuant to 18 U.S.C. § 1001). I further understand that I can be removed from the visiting area, and any other penalty within the discretion of the Warden.

Printed Name/Signature:

Street Address/City:

Vehicle License:

If visiting with an inmate, please complete the following: Name of any children under 16 years of age for whom I am responsible:

Name of Organization:

Printed Name/Signature of Staff:

(This form may be replicated via WP) 1/2

Replaces BP-224(52) of Jul 95
### Drugs Detected

**User:** Operator 1  
**Date:** 10/24/04 8:50:32 AM  
**Serial #: 09034902367 ALM00463.sca**

<table>
<thead>
<tr>
<th>Substance</th>
<th>Time</th>
<th>Strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMPHET.</td>
<td>5.750</td>
<td>1.01</td>
</tr>
<tr>
<td>N-AMPH</td>
<td>5.750</td>
<td>1.01</td>
</tr>
<tr>
<td>AMF-AMPH</td>
<td>5.750</td>
<td>1.01</td>
</tr>
<tr>
<td>TA3</td>
<td>5.750</td>
<td>1.01</td>
</tr>
<tr>
<td>MDA</td>
<td>5.750</td>
<td>1.01</td>
</tr>
<tr>
<td>MORPH</td>
<td>5.750</td>
<td>1.01</td>
</tr>
<tr>
<td>TETRAHEDRON</td>
<td>5.750</td>
<td>1.01</td>
</tr>
</tbody>
</table>

**Notes:**
- File Name: ALM00463.sca
- Name: Std Cal
- Alkal Mode: 
- TNT | 6.070 | 6.724 | -0.040 | 0.040 | 750 | Neg |
- Nitro | 3.830 | 4.249 | -0.100 | 0.120 | 750 | Neg |
- Last Cal: 10/24/04 7:40 AM | 7.990 | 8.864 | -0.040 | 0.040 | 150 | Neg |
- Serial #: 09034902367
- Mode: Dual | 7.990 | 8.864 | -0.040 | 0.040 | 150 | Neg |
- Sample Time: 7.0 (s) | 7.990 | 8.864 | -0.040 | 0.040 | 150 | Neg |
- Warnings: AM NO3 | 4.530 | 5.020 | -0.040 | 0.040 | 150 | Neg |
- Current User: Operator 1 | 4.530 | 5.020 | -0.040 | 0.040 | 150 | Neg |
- N-AMPH | 5.750 | 1.01 |
- PCAL | 0.893 | 0.872 | -0.040 | 0.040 | 150 | Neg |
- Detaltor Temp: 183 | 7.775 | 8.723 | -0.040 | 0.040 | 150 | Neg |
- Desorber Temp: 220 | 7.775 | 8.723 | -0.040 | 0.040 | 150 | Neg |
- THC | 8.760 | 9.788 | -0.040 | 0.040 | 500 | Pos |
- METH | 5.800 | 6.567 | -0.040 | 0.040 | 500 | Pos |
- AMPHET | 5.750 | 6.591 | -0.040 | 0.040 | 500 | Pos |
- N-AMPH | 5.750 | 6.591 | -0.040 | 0.040 | 500 | Pos |
- MORPH | 7.569 | 8.492 | -0.040 | 0.040 | 750 | Pos |
- TETRAHEDRON | 7.775 | 8.723 | -0.040 | 0.040 | 750 | Pos |
- AMPH-Sulf | 7.775 | 8.723 | -0.040 | 0.040 | 750 | Pos |

**Graphs:**
- Graph 1: Ion Track Instruments
- Graph 2: Drugs Detected
- Graph 3: Assay of Drug Analysis
DATE: 10-16-04

REPLY TO:
ATTN OF: [Redacted]

SUBJECT: Visitor denied entrance to Visiting Room

TO: Captain
THRU: Operations Lieutenant

On the above date, at 1:10 PM, the following visitor [Redacted] was denied entrance into the Visiting Room.

Inmate Concerned: [Redacted]

Reason for denial: 1. Improper or no identification
2. Not on inmate's visiting list
3. Under age or without consent

CC: Institution Duty Officer
MEMORANDUM FOR J. MOORHEAD, CAPTAIN

DATE: 10-16-04

SUBJECT: Positive ION TRACK Test Result

On 10-16-04 (date), at approximately 12:56 pm (time), an electronic scan for contraband, using the Ion Track Electronic Drug Detection System, was conducted on (b)(6) (visitor name), who attempted to visit inmate (b)(6). The test was positive for the presence of Heroin. A follow-up test revealed the presence of Heroin.

This is the ( ) 1st, ( ) 2nd, ( ) 3rd, ( ) 4th Positive test result for this visitor.

Dates of previous positive test results: __________________________

__________________________

The visitor will be allowed to return to the institution:

( ) 48 hours Date 10-18-04

( ) 30 days Date ________________

( ) 90 days Date ________________

( ) 180 days Date ________________

Attached is the Title 18 (Visiting Form), the Ion Track printout receipt, and the Sample Trap used for testing.
BP-S24.022 NOTIFICATION TO VISITOR CDPFM
MAY 99
U.S. DEPARTMENT OF JUSTICE

FEDERAL BUREAU OF PRISONS

Date: 10/14/99 Time: 12:30 PM
(b)(7)c

Institution: USP ATWATER
Location: OFFICE OF VRADO

Name of Inmate To Be Visited:

Name of Inmate To Be Visited:

It is a Federal crime to bring upon the institution any firearm, destructive device, ammunition, other object designed to be used as a weapon, narcotic drug, controlled substance, alcoholic beverage, currency, or any other object that threatens the order, discipline, or security of a prison, or the life, health, or safety of an individual without the knowledge and consent of the Warden. 18 U.S.C. §§ 1791 and 3571 provides a penalty of imprisonment for not more than twenty years, a fine of not more than $250,000 or both, to a person who provides, or attempts to provide, to an inmate any prohibited object. All persons entering upon these premises are subject to routine searches of their person, property (including vehicles), and packages. The Warden, upon reasonable suspicion that a person may be introducing contraband or demonstrating actions that might otherwise endanger institution safety, security, or good order, may request the person, as a prerequisite to entry, to submit to a visual search, pat search, urine surveillance test, breathalyzer test, or other comparable test. A visitor has the option to refuse any of the search or test or entrance procedures, with the result that the visitor will not be permitted entry to the institution.

NOTE: Your refusal of these procedures means that you will not be permitted entry to the institution, and you will be allowed to leave the institution property, unless there is a reason to detain and/or arrest you. The use of cameras or recording equipment without permission of the Warden is strictly prohibited; violators are subject to criminal prosecution. Once a visit with an inmate begins, if a visitor leaves the visiting area, the visit will be terminated. Any exception must be approved by the visiting room officer.

PLEASE ANSWER THE FOLLOWING QUESTIONS: Are any of the following items in your possession, or in possession of children in your party under 16 years of age?

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firearms</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Explosives</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Weapons</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Ammunition</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Metal Cutting tools</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Recording Equipment</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Cellular Phone</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Narcotics</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Marijuana</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Camera</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Food Items</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Alcoholic Beverages</td>
<td>Yes</td>
<td>X</td>
</tr>
<tr>
<td>Prescription Drug*</td>
<td>Yes</td>
<td>X</td>
</tr>
</tbody>
</table>

*All types of medication carried must be listed in the following space, and must be left at the entry area:

I have read, I understand, and I agree to the above. If I am visiting with an inmate, I also understand and agree to abide by the visiting guidelines provided me by this institution. I declare that I do not have articles in my possession which I know to be a threat to institution safety, security, or good order. I am aware that if I have questions about what is authorized, I should consult with the officer. I am aware that the penalty for making a false statement is a fine of not more than $250,000 or imprisonment for not more than 20 years or both (punishable by fine or imprisonment for not more than 20 years or both (punishable by fine or imprisonment)

Printed Name/Signature:

Street Address/City:

Vehicle License No:

If visiting with an unrelated minor, I am responsible:

If not visiting with an inmate:

Name of Organization:

Printed Name/Signature of Stated:

(This form may be replicated via WP)

Replaces BP-224(S2) of Jul 95
### Drugs Detected

<table>
<thead>
<tr>
<th>Substance Detected</th>
<th>Time (min)</th>
<th>Intensity</th>
<th>Height (mV)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEROIN</td>
<td>4.989</td>
<td>766</td>
<td>5.489</td>
</tr>
<tr>
<td></td>
<td>5.083</td>
<td>257</td>
<td>8.014</td>
</tr>
<tr>
<td></td>
<td>5.051</td>
<td>295</td>
<td>8.014</td>
</tr>
<tr>
<td></td>
<td>5.051</td>
<td>265</td>
<td>8.014</td>
</tr>
<tr>
<td></td>
<td>5.051</td>
<td>285</td>
<td>8.014</td>
</tr>
<tr>
<td></td>
<td>5.051</td>
<td>315</td>
<td>8.014</td>
</tr>
<tr>
<td></td>
<td>5.051</td>
<td>395</td>
<td>8.014</td>
</tr>
</tbody>
</table>

### Notes
- Software Version: 8.05
- Time: 10/16/04 1:00:04 PM
- Last Call: 10/16/04 7:39:45 AM
- Serial #: 09034908267
- Mode: Dual
- Sample Time: 7.0 (s)
- Warnings: AM NO3

### Results
- **NAME**: COCAINE
- **Cal**: 7.936
- **Peak Height**: 8.077
- **Peak Time**: 0.040
- **Mode**: Pos
- **Run:** 39
- **Vol:** 750

---

### Drugs Detected

<table>
<thead>
<tr>
<th>Substance Detected</th>
<th>Time (min)</th>
<th>Intensity</th>
<th>Height (mV)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEROIN</td>
<td>4.989</td>
<td>766</td>
<td>5.489</td>
</tr>
<tr>
<td></td>
<td>5.083</td>
<td>257</td>
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<tr>
<td></td>
<td>5.051</td>
<td>295</td>
<td>8.014</td>
</tr>
<tr>
<td></td>
<td>5.051</td>
<td>265</td>
<td>8.014</td>
</tr>
<tr>
<td></td>
<td>5.051</td>
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<td>766</td>
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<td></td>
<td>5.083</td>
<td>257</td>
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### Results
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- **Cal**: 7.936
- **Peak Height**: 8.077
- **Peak Time**: 0.040
- **Mode**: Pos
- **Run:** 39
- **Vol:** 750
DATE: 10-16-04

REPLY TO
ATTN OF: (b)(7)c, Visiting Room Officer

SUBJECT: Visitor denied entrance to Visiting Room

TO: Captain

THRU: Operations Lieutenant

On the above date, at 11:00 a.m./p.m., the following visitor (Mr./Mrs./Miss) was denied entrance into the Visiting Room.

***************

Inmate Concerned

***************

Reason for denial: 1. Improper or no identification
2. Not on inmate's visiting list
3. Under age or without parent/guardian
   [ ] Other ____________

Comments: __________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________  

CC: Institution Duty Officer
MEMORANDUM FOR J. MOORHEAD, CAPTAIN

DATE: 10-16-09

SUBJECT: Positive ION TRACK Test Result

On 10-16-09 (date), at approximately 10:17 AM (time), an electronic scan for contraband, using the Ion Track Electronic Drug Detection System, was conducted on (visitor name), who attempted to visit inmate

The test was positive for the presence of Heroin. A follow-up test revealed the presence of Heroin.

This is the ( ) 1st, (X) 2nd, ( ) 3rd, ( ) 4th Positive test result for this visitor.

Dates of previous positive test results: __________________________

________________________

The visitor will be allowed to return to the institution:

( ) 48 hours Date 10-18-09

( ) 30 days Date __________________

( ) 90 days Date __________________

( ) 180 days Date __________________

Attached is the Title 18 (Visiting Form), the Ion Track printout receipt, and the Sample Trap used for testing.
NOTIFICATION TO VISITOR

U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF PRISONS

Date: 10-16-04 Time: 10:35 AM Officer's Name

Institution: USP ATWATER Location: AMENDED PERMIT

Name of Inmate To Be Visited: ____________

It is a Federal crime to bring upon the institution any firearm, destructive device, ammunition, other object designed to be used as a weapon, narcotic drug, controlled substance, alcoholic beverage, currency, or any other object that threatens the order, discipline, or security of a prison, or the life, health, or safety of an individual without the knowledge and consent of the Warden. 18 U.S.C. §§ 1791 and 3571 provide a penalty of imprisonment for not more than twenty years, a fine of not more than $250,000 or both, to a person who provides, or attempts to provide, to an inmate any prohibited object. All persons entering upon these premises are subject to routine searches of their person, property, including vehicles), and packages. The Warden, upon reasonable suspicion that a person may be introducing contraband or demonstrating actions that might otherwise endanger institution safety, security, or good order, may request the person, as a prerequisite to entry, to submit to a visual search, pat search, urine surveillance test, breathalyzer test, or other comparable test. A visitor has the option to refuse any of the search or test or entrance procedures, with the result that the visitor will not be permitted entry to the institution.

NOTE: Your refusal of these procedures means that you will not be permitted entry to the institution, and you will not be allowed to leave the institution property, unless there is a reason to detain and/or arrest you. The use of a camera or recording equipment without permission of the Warden is strictly prohibited; violators are subject to criminal prosecution. Once a visit with an inmate begins, if a visitor leaves the visiting area, the visit will be terminated. Any exception must be approved by the visiting room officer.

PLEASE ANSWER THE FOLLOWING QUESTIONS: Are any of the following items in your possession, or in possession of children in your party under 16 years of age?

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firearms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Explosives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weapons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ammunition</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Metal Cutting tools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recording Equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cellular Phone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Narcotics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marijuana</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Camera</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food Items</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcoholic Beverages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prescription Drug*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*All types of medication must be listed in this following space, and must be left at the entry area.

I have read, I understand, and I agree to the above. If I am visiting with an inmate, I also understand and agree to abide by the visiting guidelines provided me by this institution. I declare that I do not have articles in my possession which I know to be a threat to institution safety, security, or good order. I am aware that if I have questions about what is authorized, I should consult with the officer. I am aware that the penalty for making a false statement is a fine of not more than $250,000 or imprisonment of not more than five years or both (or both). If I am visiting with an inmate, please complete the following: Names of children under 16 years of age for whom I am responsible:

If not visiting with an inmate, please indicate:

Name of Organization: ____________________ Purpose of Visit: Social

Printed Name/Signature of Staff Witness: ____________________

Replaces BP-224(52) of Jul 95
## Drugs Detected

### Itemiser 3 (D)

**User:** Operator 1  
**Date:** 10/16/04 10:48:25 AM  
**Serial No.:** 09034908267 ALM00452.sca  
**Version:** B.05

<table>
<thead>
<tr>
<th>Substance Detected</th>
<th>Time (s)</th>
<th>Strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heroin</td>
<td>0.799</td>
<td>1.47</td>
</tr>
</tbody>
</table>

**Negative Ion Peaks:**

<table>
<thead>
<tr>
<th>Time (s)</th>
<th>Height (mT)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.75</td>
<td>276</td>
</tr>
<tr>
<td>6.25</td>
<td>92</td>
</tr>
<tr>
<td>6.29</td>
<td>725</td>
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<tr>
<td>6.32</td>
<td>644</td>
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<tr>
<td>7.29</td>
<td>525</td>
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<tr>
<td>7.32</td>
<td>452</td>
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</table>

**Positive Ion Peaks:**

<table>
<thead>
<tr>
<th>Time (s)</th>
<th>Height (mT)</th>
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</thead>
<tbody>
<tr>
<td>6.06</td>
<td>720</td>
</tr>
<tr>
<td>7.00</td>
<td>830</td>
</tr>
<tr>
<td>7.07</td>
<td>830</td>
</tr>
<tr>
<td>7.13</td>
<td>830</td>
</tr>
<tr>
<td>7.20</td>
<td>830</td>
</tr>
<tr>
<td>7.25</td>
<td>830</td>
</tr>
</tbody>
</table>

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### Itemiser 3 (D)

**User:** Operator 1  
**Date:** 10/16/04 10:47:06 AM  
**Serial No.:** 09034908267 ALM00451.sca  
**Version:** B.05

<table>
<thead>
<tr>
<th>Substance Detected</th>
<th>Time (s)</th>
<th>Strength</th>
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</thead>
<tbody>
<tr>
<td>Heroin</td>
<td>0.799</td>
<td>1.47</td>
</tr>
</tbody>
</table>

**Negative Ion Peaks:**

<table>
<thead>
<tr>
<th>Time (s)</th>
<th>Height (mT)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.75</td>
<td>276</td>
</tr>
<tr>
<td>5.18</td>
<td>138</td>
</tr>
<tr>
<td>5.18</td>
<td>0.38</td>
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<tr>
<td>5.64</td>
<td>92</td>
</tr>
<tr>
<td>5.93</td>
<td>286</td>
</tr>
<tr>
<td>6.22</td>
<td>725</td>
</tr>
</tbody>
</table>

**Positive Ion Peaks:**

<table>
<thead>
<tr>
<th>Time (s)</th>
<th>Height (mT)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.06</td>
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</tr>
<tr>
<td>7.00</td>
<td>830</td>
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<td>830</td>
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<td>7.13</td>
<td>830</td>
</tr>
<tr>
<td>7.20</td>
<td>830</td>
</tr>
<tr>
<td>7.25</td>
<td>830</td>
</tr>
</tbody>
</table>

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**File Name:** ALM00452.sca  
**Name:** Std Cal AlmLV Mode

**Notes:**

- **TNT:** 6.070 6.724 -0.40 0.40 750 Neg
- **Nitro:** 3.830 4.243 -0.10 0.120 750 Neg
- **Last Cal:** 7.990 8.851 -0.40 0.40 150 Neg
- **Serial No.:** 09034908267
- **PETN:** 7.992 8.853 -0.40 0.40 150 Neg
- **Sample Time:** 7.0 (s)
- **Warning:** AM NO3
- **Current User:** Operator 1
- **Temp:** 80.9°C
- **Detected Temp:** 183

**File Name:** ALM00451.sca  
**Name:** Std Cal AlmLV Mode

**Notes:**

- **TNT:** 6.070 6.724 -0.40 0.40 750 Neg
- **Nitro:** 3.830 4.243 -0.10 0.120 750 Neg
- **Last Cal:** 7.990 8.851 -0.40 0.40 150 Neg
- **Serial No.:** 09034908267
- **PETN:** 7.992 8.853 -0.40 0.40 150 Neg
- **Sample Time:** 7.0 (s)
- **Warning:** AM NO3
- **Current User:** Operator 1
- **Temp:** 80.9°C
- **Detected Temp:** 183

**Detected Compounds:**

- **COCaine:** 7.936 8.893 -0.40 0.40 750 Pos
- **HEROIN:** 8.799 9.893 -0.40 0.40 500 Pos
- **TATP:** 4.070 4.364 -0.40 0.40 500 Pos
- **MDMA:** 6.320 7.082 -0.40 0.40 500 Pos
- **MORPH:** 5.659 8.483 -0.40 0.40 500 Pos
- **Temaz:** 7.775 8.712 -0.40 0.40 750 Pos
- **Amph-Sulf:** 7.775 8.712 -0.40 0.40 750 Pos
It is a Federal crime to bring into the institution any weapon, narcotic drug, controlled substance, destructive device, ammunition, other object designed to be used as a weapon, or any object that threatens the order, discipline, or security of a prison, or the life, health, or safety of an inmate without the knowledge and consent of the Warden. 18 U.S.C. §§ 1791 and 3571 provides a penalty of imprisonment for not more than twenty years, a fine of not more than $250,000 or both, to a person who provides, attempts to provide, or an inmate any prohibited object. All persons entering upon these premises are subject to routine searches of their person, property (including vehicles), and packages. The Warden, upon reasonable suspicion that a person may be introducing contraband or demonstrating actions that might endanger institution safety, security, or good order, may request the person, as a prerequisite to entry, to submit to a visual search, pat search, urine surveillance test, breathalyzer test, or other comparable test. A visitor has the option to refuse any of the search or test or entrance procedures, with the result that the visitor will not be permitted entry to the institution.

NOTE: Your refusal of these procedures means that you will not be permitted entry to the institution, and you will be allowed to leave the institution property, unless there is a reason to detain and/or arrest you. The use of cameras or recording equipment without permission of the Warden is strictly prohibited; violators are subject to criminal prosecution. Once a visit with an inmate begins, if a visitor leaves the visiting area, the visit will be terminated. Any exception must be approved by the visiting room officer.

Please answer the following questions: Are any of the following items in your possession, or in possession of children in your party under 16 years of age?

<table>
<thead>
<tr>
<th>Item</th>
<th>Possessed</th>
<th>Possessed by Child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firearms</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Explosives</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Weapons</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Ammunition</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Metal Cutting Tools</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Recording Equipment</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Cellular Phone</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Narcotics</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Marijuana</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Camera</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Food Items</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Alcoholic Beverages</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Prescription Drugs</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
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*All types of medication carried must be listed in the following space, and must be left at the entry area:

I have read, I understand, and I agree to the above. If I am visiting with an inmate, I also understand and agree to abide by the visiting guidelines provided me by this institution. I declare that I do not have articles in my possession which I know to be a threat to institution safety, security, or good order. I am aware that if I have questions about what is authorized, I should consult with the officer. I am aware that the penalty for making a false statement is a fine of not more than $250,000 or imprisonment of not more than five years or both (18 U.S.C. § 1001). I am aware that the visiting area, including restrooms in the visiting area, may be monitored.

Printed Name/Signature: ____________________________

Street Address/City: ____________________________

Vehicle License No.: ____________________________

If visiting with an inmate, please indicate:

Name of inmate: ____________________________

Name of child under 16 years of age for whom I am responsible: ____________________________

If not visiting with an inmate, please indicate:

Name of Organization: ____________________________

Printed Name/Signature of Staff Witness: ____________________________
DATE: 10-16-04

REPLY TO ATTN OF: [Redacted], Visiting Room Officer

SUBJECT: Visitor denied entrance to Visiting Room

TO: Captain

THRU: Operations Lieutenant

On the above date, at 2:20 A.M. (a.m./p.m.), the following visitor (Mr. [Redacted]/Miss [Redacted]) was denied entrance into the Visiting Room.

Inmate Concerned: [Redacted]

Reason for denial: 1. Improper or no identification
                         2. Not on inmate's visiting list
                         3. Under age or without parent/guardian
                         4. Other Two Positives on ion machine

Comments: __________________________
                         __________________________
                         __________________________

CC: Institution Duty Officer
MEMORANDUM FOR J. MOORHEAD, CAPTAIN

DATE: 10-16-04

SUBJECT: Positive ION TRACK Test Result

On 10-16-04 (date), at approximately 8:09 A.M. (time), an electronic scan for contraband, using the Ion Track Electronic Drug Detection System, was conducted on (visitor name) who attempted to visit inmate (b)(6) (b)(6). The test was positive for the presence of Amphetamine. A follow-up test revealed the presence of Amphetamine.

This is the ( ) 1st, ( ) 2nd, ( ) 3rd, ( ) 4th Positive test result for this visitor.

Dates of previous positive test results:

The visitor will be allowed to return to the institution:

☑ 48 hours Date 10-18-04

( ) 30 days Date

( ) 90 days Date

( ) 180 days Date

Attached is the Title 18 (Visiting Form), the Ion Track printout receipt, and the Sample Trap used for testing.
BP-S224.022 NOTIFICATION TO VISITOR CDFRM  
MAY 99  
U.S. DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF PRISONS

Date: 10-11-04 Time: AM Officer's Name:  
Institution: USP ATWATER Location: ATWATER, CALIFORNIA

Name of Inmate To Be Visited:  

It is a Federal crime to bring upon the institution grounds any firearm, destructive device, ammunition, other object designed to be used as a weapon, narcotic drug, controlled substance, alcoholic beverage, currency, or any other object that threatens the order, discipline, or security of a prison, or the life, health, or safety of an individual without the knowledge and consent of the Warden. 18 U.S.C. §§ 1791 and 3571 provides a penalty of imprisonment for not more than twenty years, a fine of not more than $250,000 or both, to a person who provides, or attempts to provide, to an inmate any prohibited object. All persons entering upon these premises are subject to routine searches of their person, property (including vehicles), and packages. The Warden, upon reasonable suspicion that a person may be introducing contraband or demonstrating actions that might otherwise endanger institution safety, security, or good order, may request the person, as a prerequisite to entry, to submit to a visual search, pat search, urine surveillance test, breathalyzer test, or other comparable test. A visitor has the option to refuse any of the search or test or entrance procedures, with the result that the visitor will not be permitted entry to the institution.

NOTE: Your refusal of these procedures means that you will not be permitted entry to the institution, and you will be allowed to leave the institution property, unless there is a reason to detain and/or arrest you. The use of cameras or recording equipment without permission of the Warden is strictly prohibited; violators are subject to criminal prosecution. Once a visit with an inmate begins, if a visitor leaves the visiting area, the visit will be terminated. Any exception must be approved by the visiting room officer.

PLEASE ANSWER THE FOLLOWING QUESTIONS: Are any of the following items in your possession, or in possession of children in your party under 16 years of age?

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<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
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<td>Firearms</td>
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<tr>
<td>Explosives</td>
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<td></td>
</tr>
<tr>
<td>Weapons</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ammunition</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Metal Cutting tools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recording Equipment</td>
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<td></td>
</tr>
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<td>Cellular Phone</td>
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<td></td>
</tr>
<tr>
<td>Narcotics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marijuana</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Camera</td>
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<td></td>
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<td>Alcoholic Beverages</td>
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<tr>
<td>Prescription Drug*</td>
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<td></td>
</tr>
</tbody>
</table>

*All types of medication carried must be listed in the following space, and must be left at the entry area:

I have read, I understand, and I agree to the above. If I am visiting with an inmate, I also understand and agree to abide by the visiting guidelines provided by this institution. I declare that I do not have articles in my possession which I know to be a threat to institution safety, security, or good order. I am aware that if I have questions about what is authorized, I should consult with the officer. I am aware that the penalty for making a false statement is a fine of not more than $250,000 or imprisonment of not more than five years or both (pursuant to 18 U.S.C. § 1001). I am aware that the visiting area, including restrooms in the visiting area, may be monitored.

Printed Name/Signature:  
Street Address/City:  
Vehicle License No.:  

If visiting with an inmate, please complete the following: Names of children under 16 years of age for whom I am responsible:

If not visiting with an inmate, please indicate:

Name of Organization: N/A Purpose of Visit: Social  
Printed Name/Signature of Staff Witness:  

(This form may be replicated via WP)  
Replaces BP-224(52) of Jul 93
DATE: 10-11-04

REPLY TO
ATTN OF: (b)(7)c Visiting Room Officer

SUBJECT: Visitor denied entrance to Visiting Room

TO: Captain

THRU: Operations Lieutenant

On the above date, at 8:30 (a.m./p.m.), the following visitor (Mr./Mrs./Miss) ___________ was denied entrance into the Visiting Room.

Inmate Concerned: (b)(6)

Reason for denial: 1. Improper or no identification
2. Not on inmate's visiting list
3. Under age or without parent/guardian
4. Other Two Positive tests on Ien Machine

Comments: ______________________________

______________________________

______________________________

______________________________

CC: Institution Duty Officer
MEMORANDUM FOR J. MOORHEAD, CAPTAIN

DATE: 10-11-04

SUBJECT: Positive ION TRACK Test Result

On 10-11-04 (date), at approximately 8:30 AM (time), an electronic scan for contraband, using the Ion Track Electronic Drug Detection System, was conducted on (visitor name), who attempted to visit inmate (b)(6). The test was positive for the presence of Heroin. A follow-up test revealed the presence of Heroin.

This is the ☑ 1st, ( ) 2nd, ( ) 3rd, ( ) 4th Positive test result for this visitor.

Dates of previous positive test results: __________________________

_________________________  __________________________

The visitor will be allowed to return to the institution:

☒ 48 hours    Date 10-13-04

( ) 30 days    Date __________________________

( ) 90 days    Date __________________________

( ) 180 days   Date __________________________

Attached is the Title 18 (Visiting Form), the Ion Track printout receipt, and the Sample Trap used for testing.
DATE: 10-11-04

REPLY TO ATTN OF: (b)(7)c

SUBJECT: Visitor denied entrance to Visiting Room

TO: Captain

THRU: Operations Lieutenant

On the above date, at 12:40 (a.m. /p.m.), the following visitor (Mr./Mrs./Miss) (b)(6) was denied entrance into the Visiting Room (b)(6).

Inmate Concerned (b)(6)

REGISTER NUMBER

Reason for denial: 1. Improper or no identification 2. Not on inmate's visiting list 3. Under age or without parent/guardian 4. Other Two positive tests on Ion Machine

Comments:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

CC: Institution Duty Officer
MEMORANDUM FOR J. MOORHEAD, CAPTAIN

DATE: 10-11-04

SUBJECT: Positive ION TRACK Test Result

On 10-11-04 (date), at approximately 12:33 pm (time), an electronic scan for contraband, using the Ion Track Electronic Drug Detection System, was conducted or (b)(6) (visitor name), who attempted to visit inmate (b)(6) The test was positive for the presence of Heroin. A follow-up test revealed the presence of Heroin. This is the (x) 1st, ( ) 2nd, ( ) 3rd, ( ) 4th Positive test result for this visitor.

Dates of previous positive test results: ____________________________

________________________

The visitor will be allowed to return to the institution:

(x) 48 hours Date 10-13-04

( ) 30 days Date ____________________________

( ) 90 days Date ____________________________

( ) 180 days Date ____________________________

Attached is the Title 18 (Visiting Form), the Ion Track printout receipt, and the Sample Trap used for testing.
BP-S224.022 NOTIFICATION TO VISITOR CDFRM
MAY 99
U.S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF PRISONS

Date: 01-11-94 Time: 12:10 2m

Institution: USP ATWATER

(b)(7)c

Name of Inmate To Be Visited:

It is a Federal crime to bring upon the institution grounds any firearm, destructive device, ammunition, other object designed to be used as a weapon, narcotic drug, controlled substance, alcoholic beverage, currency, or any other object that threatens the order, discipline, or security of a person, or the life, health, or safety of an individual without the knowledge and consent of the Warden. 18 U.S.C. §§ 1791 and 3571 provides a penalty of imprisonment for not more than twenty years, a fine not more than $250,000 or both, to a person who provides, or attempts to provide, to an inmate any prohibited object. All persons entering upon these premises are subject to routine searches of their person, property (including vehicles), and packages. The Warden, upon reasonable suspicion that a person may be introducing contraband or demonstrating actions that might otherwise endanger institution safety, security, or good order, may request the person, as a prerequisite to entry, to submit to a visual search, pat search, urine surveillance test, breathalyzer test, or other comparable test. A visitor has the option to refuse any of the search or test or entrance procedures, with the result that the visitor will not be permitted entry to the institution.

NOTE: Your refusal of these procedures means that you will not be permitted entry to the institution, and you will be allowed to leave the institution property, unless there is a reason to detain and/or arrest you. The use of cameras or recording equipment without permission of the Warden is strictly prohibited; violators are subject to criminal prosecution. Once a visit with an inmate begins, if a visitor leaves the visiting area, the visit will be terminated. Any exception must be approved by the visiting room officer.

PLEASE ANSWER THE FOLLOWING QUESTIONS: Are any of the following items in your possession, or in possession of children in your party under 16 years of age?

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firearms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Explosives</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Weapons</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Ammunition</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Metal Cutting tools</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Recording Equipment</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Cellular Phone</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Narcotics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marijuana</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Camera</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food Items</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcoholic Beverages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prescription Drug*</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*All types of medication carried must be listed in the following space, and must be left at the entry area:

I have read, understand, and agree to the above. If I am visiting with an inmate, I also understand and agree to abide by the visiting guidelines provided to me by this institution. I declare that I do not have articles in my possession which I know to be a threat to institution safety, security, or good order. I am aware that if I have questions about what is authorized, I should consult with the officer. I am aware that the penalty for making a false statement is a fine of not more than $250,000 or imprisonment of not more than five years or both (pursuant to 18 U.S.C. § 1001). I am aware that the visiting area, including restrooms in the visiting area, are video monitored.

Printed Name/Signature of Visitor/Parent/Educational Official:

Printed Name/Signature of Staff Witness:

(This form may be replicated via WP)

Replaces BP-224(52) of Jul 95
### Drugs Detected

#### ITEMISER 3 (D) 10/11/04 12:40:53 PM

<table>
<thead>
<tr>
<th>Substance</th>
<th>Time</th>
<th>Height</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>TETRAZOLIN</td>
<td>1,29</td>
<td>1,762</td>
<td>Neg</td>
</tr>
<tr>
<td>TETRAMOL</td>
<td>1,29</td>
<td>1,762</td>
<td>Neg</td>
</tr>
<tr>
<td>HERON</td>
<td>1,29</td>
<td>1,762</td>
<td>Neg</td>
</tr>
</tbody>
</table>

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<thead>
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<th>Substance</th>
<th>Time</th>
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<tbody>
<tr>
<td>COCAINE</td>
<td>1.29</td>
<td>1,762</td>
<td>Neg</td>
</tr>
<tr>
<td>HEROIN</td>
<td>1.29</td>
<td>1,762</td>
<td>Neg</td>
</tr>
<tr>
<td>THC</td>
<td>1.29</td>
<td>1,762</td>
<td>Neg</td>
</tr>
</tbody>
</table>

### Notes
- Software Version: 8.05
- Time: 10/11/04 12:40:53 PM
- Last Call: 10/11/04 12:40:53 PM
- Sample Time: 7.0 (s)
DATE: 10-03-04

REPLY TO
ATTN OF: Visiting Room Officer

SUBJECT: Visitor denied entrance to Visiting Room

TO: Captain

THRU: Operations Lieutenant

On the above date, at 9:45 a.m., the following visitor was denied entrance into the Visiting Room:

Reason for denial: 1. Improper or no identification
2. Not on inmate's visiting list
3. Under age or without parent/guardian
4. Tested positive twice on Top Scanner

Comments:

CC: Institution Duty Officer
MEMORANDUM FOR J. MOORHEAD, CAPTAIN

DATE: 10-03-04

SUBJECT: Positive ION TRACK Test Result

On 10-03-04 (date), at approximately 9:45 AM (time), an electronic scan for contraband, using the Ion Track Electronic Drug Detection System, was conducted on (visitor name), who attempted to visit inmate (b)(6). The test was positive for the presence of Amphetamines. A follow-up test revealed the presence of Amphetamines. This is the (X) 1st, ( ) 2nd, ( ) 3rd, ( ) 4th Positive test result for this visitor.

Dates of previous positive test results: ____________________________

________________________

The visitor will be allowed to return to the institution:

(X) 48 hours Date 10-5-04

( ) 30 days Date _________________

( ) 90 days Date _________________

( ) 180 days Date _________________

Attached is the Title 18 (Visiting Form), the Ion Track printout receipt, and the Sample Trap used for testing.
It is a Federal crime to bring upon the institution grounds any firearm, destructive device, ammunition, other object designed to be used as a weapon, narcotic drug, controlled substance, alcoholic beverage, currency, or any other object that threatens the order, discipline, or security of a prison, or the life, health, or safety of an individual without the knowledge and consent of the Warden. 18 U.S.C. §§ 1791 and 3571 provides a penalty of imprisonment for not more than twenty years, a fine of not more than $250,000 or both, to a person who provides, or attempts to provide, to an inmate any prohibited object. All persons entering upon these premises are subject to routine searches of their person, property (including vehicles), and packages. The Warden, upon reasonable suspicion that a person may be introducing contraband or demonstrating actions that might otherwise endanger institution safety, security, or good order, may request the person, as a prerequisite to entry, to submit to a visual search, pat search, urine surveillance test, breathalyzer test, or other comparable test. A visitor has the option to refuse any of the search or test or entrance procedures, with the result that the visitor will not be permitted entry to the institution.

NOTE: Your refusal of these procedures means that you will not be permitted entry to the institution, and you will not be allowed to leave the institution property, unless there is a reason to detain and/or arrest you. The use of cameras or recording equipment without permission of the Warden is strictly prohibited; violators are subject to criminal prosecution. Once a visit with an inmate begins, if a visitor leaves the visiting area, the visit will be terminated. Any exception must be approved by the visiting room officer.

PLEASE ANSWER THE FOLLOWING QUESTIONS: Are any of the following items in your possession, or in possession of children in your party under 16 years of age?

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<td>No</td>
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<td>Ammunition</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Metal Cutting tools</td>
<td>Yes</td>
<td>No</td>
</tr>
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<td>Recording Equipment</td>
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*All types of medication carried must be listed in the following space, and must be left at the entry area:

I have read, I understand, and I agree to the above. If I am visiting with an inmate, I also understand and agree to abide by the visiting guidelines provided me by this institution. I declare that I do not have articles in my possession which I know to be a threat to institution safety, security, or good order. I am aware that if I have questions about what is authorized, I should consult with the officer. I am aware that the penalty for making a false statement is a fine of not more than $250,000 or imprisonment of not more than five years or both (pursuant to 18 U.S.C. § 1001). I am aware that the visiting area, including restrooms in the visiting area, is not intended for use as a medical facility.

Printed Name:

Street Address:

Vehicle License:

If visiting with an inmate, I am responsible for:

If not visiting with an inmate, please indicate:

Name of Organization:

Purpose of Visit:

Printed Name/Signature of Staff Witness:

(This form may be replicated via WP) Replaces BP-224(52) of Jul 95
### Drugs Detected

<table>
<thead>
<tr>
<th>Substance Detected</th>
<th>Ion Peaks</th>
<th>Time</th>
<th>Height</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMphetamine</td>
<td>/</td>
<td>5.760</td>
<td>1.98</td>
</tr>
</tbody>
</table>

### Notes:
- **File Name:** ALM00423.sca
- **Version:** 8.05
- **User:** Operator 1
- **Time:** 10/04/94 9:34:06 AM
- **Serial #:** 09034908267 ALM00423.sca

### Results:
- **TNT:** 5.100, 6.777 (Std Cal)
- **Nitroglycerin (NG):** 6.100, 0.000 (Std Cal)
- **AIIM:** 6.100, 0.000 (Std Cal)

### Warnings:
- **Sample Time:** 7.0 (s)
- **Sample:** AM NO3
- **Current User:** Operator 1
- **N-Cal:** 0.896 Offset: -0.000
- **P-Cal:** 0.887 Offset: -0.000
- **Detectors Temp:** 180

---

### Instruments

<table>
<thead>
<tr>
<th>Substance Detected</th>
<th>Ion Peaks</th>
<th>Time</th>
<th>Height</th>
</tr>
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<tbody>
<tr>
<td>AMphetamine</td>
<td>/</td>
<td>5.760</td>
<td>1.98</td>
</tr>
</tbody>
</table>

### Notes:
- **File Name:** ALM00424.sca
- **Version:** 8.05
- **User:** Operator 1
- **Time:** 10/04/94 9:46:53 AM
- **Serial #:** 09034908268 ALM00424.sca

### Results:
- **TNT:** 6.770, 6.777 (Std Cal)
- **Nitroglycerin (NG):** 6.100, 0.000 (Std Cal)
- **AIIM:** 6.100, 0.000 (Std Cal)

### Warnings:
- **Sample Time:** 7.0 (s)
- **Sample:** AM NO3
- **Current User:** Operator 1
- **N-Cal:** 0.896 Offset: -0.000
- **P-Cal:** 0.887 Offset: -0.000
- **Detectors Temp:** 180