



METROPOLITAN POLICE DEPARTMENT

CITY OF ST. LOUIS - 1200 CLARK AVENUE - ST. LOUIS, MISSOURI 63103

ATTORNEY OF RECORD

I, JOSEPH MCCALLOCH do hereby enter my name as the attorney of
 (Attorney's Name)
 record for DET WENDELL ISHMAN regarding the investigation of I.A.D.

File # _____

[Signature]
 Attorney's Signature

3-14-07
 Date

[Redacted]
 Contact Number

Det. Wendell Ishman
 Officer/Employee's Signature

3-14-07
 Date

[Redacted]
 Contact Number





METROPOLITAN POLICE DEPARTMENT

CITY OF ST. LOUIS - 1200 CLARK AVENUE - ST. LOUIS, MISSOURI 63103

ADVICE OF RIGHTS

I wish to advise you that you are being questioned as part of an official investigation of the Police Department. You will be asked questions related and specifically directed to the performance of your official duties or fitness for office. You are entitled to all the rights and privileges guaranteed by the laws and the Constitution of this State and the Constitution of the United States, including the right not to be compelled to incriminate yourself. I further wish to advise you that if you refuse to testify or to answer questions relating to the performance of your official duties or fitness for duty, you will be subject to departmental charges which could result in your dismissal from the Police Department. If you do answer, these statements may be used against you in relation to subsequent departmental charges, but not in any subsequent criminal proceedings. I understand that all matters discussed are confidential and that I shall not discuss or communicate any part of these matters to any other person, other than my attorney, without prior written permission from the Commander, Internal Affairs.

I have read and fully understand the "Advice of Rights" as it appears above. This information has also been read to me prior to my preparation of my report.

St. Wendell Johnson 5637
Signature of Officer

3-14-07
Date

Sgt. Steve C. (unreadable) 4303710
Internal Affairs Investigator

March 14, 2007
Date

06/276
IAD File Number

METROPOLITAN POLICE DEPARTMENT
CITY OF ST. LOUIS

EVIDENCE

Any added information and/or corrections made by
Police Laboratory Personnel are in RED ink

DATE 11-6-06 DIST. OF OCCURRENCE 9 ~~CONTRIBUTOR NUMBER~~ IAD File # 06/270 07/068

LOCATION OF OCCURRENCE City of St. Louis

LOCATION EVIDENCE RECOVERED _____

TIME EVIDENCE RECOVERED _____

~~SECTION~~ SLMPD

ADDRESS 1200 Clark

SUSPECT P.O. Robert Singh 1352/441 et al

ADDRESS 1200 Clark

OFFENSE Alleged conduct underlying an Detective A.R.# _____

WARRANT INFORMATION: issued refused pending under advisement
 not applied for juvenile

CONTENTS 2 (two) Floppy Disc containing taped interviews and Advice of Rights/Attorney of Record Form For:
Schwartz DSN 5494 Edmond DSN 6139 Lathan DSN 5240
Enns DSN 5028 ISMoon DSN 5027 Biondanno DSN 4868
Schell DSN 4006 Kranz DSN 4215 SOMBYE DSN 3913 Distertaupt
Singh DSN 6357 Merendy DSN 3920 Kitchell DSN 4974

OWNER _____

ADDRESS _____

INVESTIGATING OFFICER Sgt SPearson DSN 4303 ASSGNMT. 710

SEIZING OFFICER Sgt Pearson DSN 4303 ASSGNMT. 710