

06/10/99

Undergraduate

Page 1

Mr. Ricky A. Swope
P.O. Box 290547
Davie FL 33329-0547

ID Number: 0103622
SSN: 381-62-2031
Birth Date: 05/20/56
Birth Name:

Course	Title	Grd R	Hrs Att	Hrs Cmpt	Grade Points	
BUS 322	BUSINESS LAW II	A	3.00	3.00	12.00	
FALL '86 Totals:			3.00	3.00	12.00	GPA = 4.0000
Cumulative Totals:			3.00	3.00	12.00	GPA = 4.0000
CRI 325	CRIME IN SOUTH FLORIDA	A	3.00	3.00	12.00	
CONT. ED. OFF-CAMPUS FALL I '86 Totals:			3.00	3.00	12.00	GPA = 4.0000
Cumulative Totals:			6.00	6.00	24.00	GPA = 4.0000
CRI 319	CRIME AND DELINQUENCY	C+	3.00	3.00	7.50	
PAC 323	PERSONNEL PLANNING & MANAGEMENT	A	3.00	3.00	12.00	
CONT. ED. OFF-CAMPUS FALL III '86 Totals:			6.00	6.00	19.50	GPA = 3.2500
Cumulative Totals:			12.00	12.00	43.50	GPA = 3.6250
BUS 221	PRIN OF ADM & ORGANIZATION	A	3.00	3.00	12.00	
ENG 102	COMPOSITION AND LITERATURE	B	3.00	3.00	9.00	
SPRING '87 Totals:			6.00	6.00	21.00	GPA = 3.5000
Cumulative Totals:			18.00	18.00	64.50	GPA = 3.5833
PAC 402	PLANNING BUDGETING & FINANCING	A	3.00	3.00	12.00	
CONT. ED. OFF CAMPUS SPRING I '87 Totals:			3.00	3.00	12.00	GPA = 4.0000
Cumulative Totals:			21.00	21.00	76.50	GPA = 3.6429
CRI 405	POLICE ORGANIZATION&MANAGEMENT	A	3.00	3.00	12.00	
SUMMER 1 '87 Totals:			3.00	3.00	12.00	GPA = 4.0000
Cumulative Totals:			24.00	24.00	88.50	GPA = 3.6875
CRI 321	COURTS&CRIMINAL JUSTICE SYSTEM	UW	3.00	0.00	0.00	
ENG 346	CRIME AND PUNISHMENT I	C	3.00	3.00	6.00	
PHI 332	MORAL PHILOSOPHY-GEN ETHICS	NG	3.00	0.00	0.00	
CONT. ED. OFF CAMPUS SPRING II '87 Totals:			9.00	3.00	6.00	GPA = 2.0000
Cumulative Totals:			33.00	27.00	94.50	GPA = 3.5000
MAT 103	MATH/FINANCIAL & SOC SCI I	W	3.00	0.00	0.00	
CRI 350	CORRECTIONS	B	3.00	3.00	9.00	
RST 320	UNDERSTANDING THE LITURGY	C	3.00	3.00	6.00	
SPRING '88 Totals:			9.00	6.00	15.00	GPA = 2.5000

OFFICIAL TRANSCRIPT

Official copy must bear signature and impression seal.

Ronald E. Swope

UNIVERSITY REGISTRAR
16400 N.W. 32nd Avenue
Miami, Florida 33054-6459



PURSUANT TO FEDERAL LAW 93.380 9 (FAMILY EDUCATIONAL RIGHTS ACT OF 1974). INFORMATION ON THIS TRANSCRIPT MAY NOT BE RELEASED TO A THIRD PARTY WITHOUT THE STUDENT'S WRITTEN CONSENT.

06/10/99

Undergraduate

Page 2

Mr. Ricky A. Swope
 P.O. Box 290547
 Davie FL 33329-0547

ID Number: 0103622
 SSN: 381-62-2031
 Birth Date: 05/20/56
 Birth Name:

Course	Title	Grd R	Hrs Att	Hrs Cmpt	Grade Points		
Cumulative Totals:			39.00	33.00	109.50	GPA =	3.3182
CIS 205	MICROCOMPUTER APPLICATIONS	B	3.00	3.00	9.00		
CRI 420	INTERNATIONAL CRIMINAL JUSTICE	B	3.00	3.00	9.00		
FALL '88 Totals:			6.00	6.00	18.00	GPA =	3.0000
Cumulative Totals:			45.00	39.00	127.50	GPA =	3.2692
SCI 114	ASTRONOMY	A	3.00	3.00	12.00		
ENG 322	FORMS OF DRAMA	B+	3.00	3.00	10.50		
PHI 409	BUSINESS MORALITY	A	3.00	3.00	12.00		
SPRING '89 Totals:			9.00	9.00	34.50	GPA =	3.8333
Cumulative Totals:			54.00	48.00	162.00	GPA =	3.3750
000 100	@@@KANSAS STATE	TR	0.00	0.00	0.00		
000 100	TOTAL TRANSFER CREDITS	TR	6.00	6.00	0.00		
000 100	@@@WICHITA STATE	TR	0.00	0.00	0.00		
000 100	TOTAL TRANSFER CREDITS	TR	9.00	9.00	0.00		
000 100	@@@MONROE COMMUNITY COLLEGE	TR	0.00	0.00	0.00		
000 100	TOTAL TRANSFER CREDITS	TR	33.00	33.00	0.00		
000 100	@@@TOLEDO UNIVERSITY	TR	0.00	0.00	0.00		
000 100	TOTAL TRANSFER CREDITS	TR	21.00	21.00	0.00		
000 100	@@@MILITARY STUDIES	TR	0.00	0.00	0.00		
000 100	TOTAL TRANSFER CREDITS	TR	3.00	3.00	0.00		
Transfer Credits Totals:			72.00	72.00	0.00	GPA =	0.0000
Cumulative Totals:			126.00	120.00	162.00	GPA =	3.3750
TOTALS: CRED.ATT = 126.00 CRED.CPT = 120.00 GRADE.PTS = 162.00 GPA = 3.3750							

* BA - BACHELOR OF ARTS Degree Awarded on 05/89 *							
* *							
* Majors Minors *							
* ----- *							
* CJ - CRIMINAL JUSTICE *							

OFFICIAL TRANSCRIPT

Official copy must bear signature and impression seal.

Kenneth J. Davis

UNIVERSITY REGISTRAR

16400 N.W. 32nd Avenue
 Miami, Florida 33054-6459



PURSUANT TO FEDERAL LAW 93.380 9
 (FAMILY EDUCATIONAL RIGHTS ACT OF 1974),
 INFORMATION ON THIS TRANSCRIPT MAY NOT
 BE RELEASED TO A THIRD PARTY WITHOUT THE
 STUDENT'S WRITTEN CONSENT.

06/10/99

Graduate

Page 1

Mr. Ricky A. Swope
 P.O. Box 290547
 Davie FL 33329-0547

ID Number: 0103622
 SSN: 381-62-2031
 Birth Date: 05/20/56
 Birth Name:

Course	Title	Grd R	Hrs Att	Hrs Cmpt	Grade Points				
MAN 701	ORGANIZATION DESIGN & THEORY	A	3.00	3.00	12.00				
FALL '90 Totals:			3.00	3.00	12.00	GPA =	4.0000		
Cumulative Totals:			3.00	3.00	12.00	GPA =	4.0000		
MAN 503	APPLIED RESEARCH METHODS	W	3.00	0.00	0.00				
TERM 1 '91 Totals:			3.00	0.00	0.00	GPA =	0.0000		
Cumulative Totals:			3.00	3.00	12.00	GPA =	4.0000		
MAN 503	APPLIED RESEARCH METHODS	W	3.00	0.00	0.00				
SPRING '93 Totals:			3.00	0.00	0.00	GPA =	0.0000		
Cumulative Totals:			3.00	3.00	12.00	GPA =	4.0000		
TOTALS: CRED.ATT =			3.00	CRED.CPT =	3.00	GRADE.PTS =	12.00	GPA =	4.0000

OFFICIAL TRANSCRIPT

Official copy must bear signature and impression seal.

Ronald Swope

UNIVERSITY REGISTRAR

16400 N.W. 32nd Avenue
 Miami, Florida 33054-6459



PURSUANT TO FEDERAL LAW 93.380 9 (FAMILY EDUCATIONAL RIGHTS ACT OF 1974), INFORMATION ON THIS TRANSCRIPT MAY NOT BE RELEASED TO A THIRD PARTY WITHOUT THE STUDENT'S WRITTEN CONSENT.



St. Thomas University

16400 N. W. 32nd Avenue • Miami, Florida 33054

Registrar's Office

Address Service Requested

Fold at line over top of envelope to
the right of the return address.

CERTIFIED

Z 203 695 457

MAIL



ASA KEVIN FREIN
STATE ATTORNEY'S OFFICE
3550 HOLLYWOOD BVD #205
HOLLYWOOD, FLORIDA 33021

33021+6891



SAO FILE - PROSECUTOR'S WORKSHEET

ASA _____ DEFENSE COUNSEL _____ Phone _____

DEFENDANT _____ CASE# _____ "J" _____

BOOKING# _____ OFFENSE REPORT# _____

CO-DEFENDANT(S) _____

DATE	NOTES [ASA: Indicate and initial firm plea offers.]
4/29	<p>need St. Thomas transcripts</p> <ol style="list-style-type: none"> 1. find case with him listed as a witness 2. demand updated CV
	<p>St. Thomas Office of Registrar 305-652-1267 28-6537</p>
	<p>B.A. of 1989</p> <ol style="list-style-type: none"> 1. spoke with registrar's office at St. Thomas 2. Mr. Swope started a graduate program at St. Thomas, but left after a couple of classes 3. will only provide information based on a subpoena
6/4/7	<p>sent sub out 305-628-6551 FAX address: St. Thomas 16400 NW 32nd Ave Miami, FL 33054</p>

St. Thomas University

The Archdiocesan University of Florida, United States of America

To all to whom these Letters shall come, Greetings in the Lord
The President and Trustees of St. Thomas University upon recommendation
of the Faculty and by virtue of the
Authority vested in Them this day conferred upon

Rick A. Swope

the degree of

Bachelor of Arts

and have granted all Rights, Privileges and Honors thereto pertaining.

In Testimony whereof, we subscribe our names and affix

the University seal at Miami, Florida,

this month of May, nineteen hundred and eighty-nine.

Richard E. Greene

President



Edward A. P. Carley

Archbishop of Miami



**MICHAEL J. SATZ
STATE ATTORNEY**

SEVENTEENTH JUDICIAL CIRCUIT OF FLORIDA

BROWARD COUNTY COURTHOUSE

201 S.E. SIXTH STREET

FORT LAUDERDALE, FLORIDA 33301-3360

PHONE (954) 831-6955

6/7/99

University of Toledo
Registrar's Office
GH 3008
2801 W. Bancroft
Toledo, OH 43606-3390

State v. Dennis Grant
98-025823MM10A

RE: Subpoena Duces Tecum for Rick A. Swope

Dear Registrar's Office:

My name is Kevin C. Frein and I'm an Assistant State Attorney with the Broward State Attorney's Office. Attached please find a subpoena duces tecum for Rick A. Swope. Mr. Swope is an expert for the defendant in this matter. Mr. Swope's resume states:

1983 - 1984 University of Toledo, Toledo, Ohio
Criminal Justice Total Credit hours - 31.

As part of the preparation for trial I'm attempting to verify the credentials of Mr. Swope. Consequently, the Broward State Attorney's Office has issued this subpoena duces tecum.

The Broward State Attorney's Office will only use this material consist with the provisions of the Buckley Amendment.

If you have questions regarding this matter, please do not hesitate to contact me at (954)-831-0336.

Sincerely,

A handwritten signature in cursive script that reads "Kevin C. Frein".

Kevin C. Frein
Assistant State Attorney
South Satellite Courthouse

cc: file (certified mail)
enclose (sub duces tecum)

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

3M

NUMBER 57687

Sent to	University of Toledo Office of the Registrar
Street & Number	GH 3008 2801 W. Bancroft
Post Office, State, & ZIP Code	Toledo, Oh. 43606-3390
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

THE SEVENTEENTH JUDICIAL CIRCUIT, BROWARD COUNTY, FLORIDA
CASE NO. 98-025823MM10A JUDGE GEHL
: O.R. NO. INVESTIGATION AGENCY SAO

FLORIDA TO ALL AND SINGULAR THE SHERIFFS OF SAID STATE AND
ORNEY OF THE SEVENTEENTH JUDICIAL CIRCUIT:

SO SUBPOENA UNIVERSITY OF TOLEDO,
3008, 2801 W. Bancroft, Toledo, OH. 43606-3390

PS Form 3800, April 1995

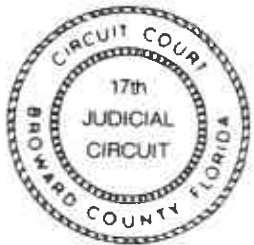
his Investigator, of the Seventeenth Judicial Circuit of Florida, in and for Broward County, at the Courthouse, 3550 HOLLYWOOD BLVD., HOLLYWOOD, ~~200 Southeast Sixth Street Fort Lauderdale~~, Florida, in Suite 205, on July 6, 1999, at 3:00 o'clock P.M., and to testify and the truth to speak on behalf of the State of Florida in a certain matter before said Court pending and undetermined, as above-styled.

The said RECORDS CUSTODIAN is hereby commanded to make available to the State Attorney, or his Investigator, the following described RECORDS, DOCUMENTS, ETC. to-wit:

ANY AND ALL RECORDS, DOCUMENTS, CERTIFIED TRANSCRIPTS PERTAINING TO RICK ANTHONY SWOPE, SSN: 381-62-2031, DOB: 05/20/56, RACE: WHITE, GENDER: MALE ATTENDING THE UNIVERSITY OF TOLEDO. THIS INCLUDES ANY INFORMATION ON RICK SWOPE STARTING CLASSES OR PROGRAMS AT THE UNIVERSITY OF TOLEDO. IN LIEU OF PERSONAL APPEARANCE RECORDS MAYBE MAILED TO ASA KEVIN FREIN, STATE ATTORNEY'S OFFICE, 3550 HOLLYWOOD BLVD., STE. #205, HOLLYWOOD, FLORIDA 33021.

And this you shall in no wise omit.

WITNESS: ROBERT E. LOCKWOOD, Clerk of said Court, and the seal of said Court, at the Courthouse at Fort Lauderdale, Broward, County aforesaid, this 7th day of June, 1999.



ROBERT E. LOCKWOOD, Clerk
By: Susan Jessup
Deputy Clerk

MICHAEL J. SATZ
State Attorney
By: *[Signature]*
LUIS R. MARTINEZ
Ass't State Attorney FL Bar # 059481

[] Broward County Courthouse
201 Southeast Sixth Street
Fort Lauderdale, FL 33301
[XX] SOUTH REGIONAL COURTHOUSE
3550 HOLLYWOOD BLVD., STE. #205
HOLLYWOOD, FLORIDA 33021

ORIGINAL SIGNATURES:
FIRST TWO COPIES

Telephone: 954/ 831-0340

US Postal Service
Receipt for Certified Mail

No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Court Serves BU Dade Public Safety Division	
Street & Number 1351 NW 12th Street Room #311	
Post Office, State, & ZIP Code Miami, Florida 33125	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

THE SEVENTEENTH JUDICIAL CIRCUIT, BROWARD COUNTY, FLORIDA
CASE NO. _____ JUDGE _____
O.R. NO. _____ AGENCY _____

FLORIDA TO ALL AND SINGULAR THE SHERIFFS OF SAID STATE AND
ORNEY OF THE SEVENTEENTH JUDICIAL CIRCUIT:

SUBPOENA _____

to make available the below-listed records to the State Attorney, or
Judicial Circuit of Florida, in and for Broward County, at the Courthouse,

201 S.E. 6th Street, Fort Lauderdale, Florida, in Suite _____, on _____,
19____, at _____ o'clock _____ M., and to testify and the truth to speak on behalf of the State
of Florida in a certain matter before said Court pending and undetermined, as above-styled.

The said _____ is hereby commanded to make available to the State
Attorney, or his Investigator, the following described _____ to-wit:

And this you shall in no wise omit.

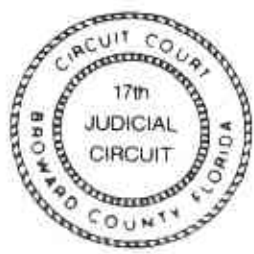
MICHAEL J. SATZ
State Attorney

By: Kevin C. Frost
Ass't State Attorney FL Bar # _____

WITNESS:

ROBERT E. LOCKWOOD, Clerk
of said Court, and the seal of said
Court, at the Courthouse at Fort
Lauderdale, Broward County
aforesaid, this 7th
day of June, 1999.

[] _____ Broward County Courthouse
201 Southeast Sixth Street
Fort Lauderdale, FL 33301
[] _____



ROBERT E. LOCKWOOD, Clerk

By: Susan J. [Signature]
Deputy Clerk

ORIGINAL SIGNATURES:
FIRST TWO COPIES

Telephone: 954/ _____

[] SERVED [] NOT SERVED TIME _____ M., DATE _____, 19 _____

State Attorney Investigator/Deputy Sheriff

IN THE COUNTY/CIRCUIT COURT OF THE SEVENTEENTH JUDICIAL CIRCUIT, BROWARD COUNTY, FLORIDA

MIAMI POLICE DEPARTMENT
COURT SERVICES BUREAU

CASE NO. 98-025823MM10A JUDGE GEHL

PERSONAL SERVICE SERVED TO: NO SERVICE DUE TO: OR NO. INVESTIGATION AGENCY SAO

RE: DENNIS GRANT

PALMER, KIRK - OFFICE OF REGISTRARS

DATE: 6-10-99 TIME 4:44p

SERVICE BY: STEWART YIST

IN THE NAME OF THE STATE OF FLORIDA TO ALL AND SINGULAR THE SHERIFFS OF SAID STATE AND INVESTIGATORS OF THE STATE ATTORNEY OF THE SEVENTEENTH JUDICIAL CIRCUIT:

YOU ARE HEREBY COMMANDED TO SUBPOENA ST. THOMAS UNIVERSITY

OFFICE OF THE REGISTRAR, 16400 NW 32nd AVENUE, MIAMI, FLORIDA 33054

if he/she be found in your County, to make available the below-listed records to the State Attorney, or his Investigator, of the Seventeenth Judicial Circuit of Florida, in and for Broward County, at the Courthouse, 3550 HOLLYWOOD BLVD., HOLLYWOOD, ~~FLORIDA~~ Florida, in Suite 205, on JUNE 6, 1999, at 3 : 00 o'clock P. M., and to testify and the truth to speak on behalf of the State of Florida in a certain matter before said Court pending and undetermined, as above-styled.

The said RECORDS CUSTODIAN is hereby commanded to make available to the State Attorney, or his Investigator, the following described RECORDS, DOCUMENTS AND ETC. to-wit:

ANY AND ALL RECORDS, DOCUMENTS, CERTIFIED TRANSCRIPTS PERTAINING TO RICK ANTHONY SWOPE, SSN: 381-62-2031, DOB: 05/20/56, RACE: WHITE GENDER: MALE ATTENDING ST. THOMAS UNIVERSITY. THIS INCLUDES ANY INFORMATION ON RICK SWOPE STARTING CLASSES OR PROGRAMS BUT NOT FINISHING THE CLASSES OR PROGRAMS. IN LIEU OF PERSONAL APPEARANCE RECORDS AND ETC. MAYBE BE MAILED TO ASA KEVIN FREIN, STATE ATTORNEY'S OFFICE, 3550 HOLLYWOOD BLVD., STE. #205, HOLLYWOOD, FLORIDA 33021.

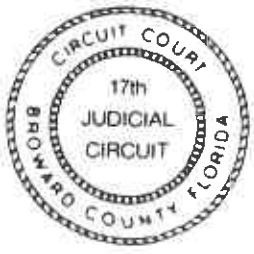
And this you shall in no wise omit.

WITNESS:

ROBERT E. LOCKWOOD, Clerk of said Court, and the seal of said Court, at the Courthouse at Fort Lauderdale, Broward County aforesaid, this 7th day of June, 1999.

ROBERT E. LOCKWOOD, Clerk

By: Susan Jessup
Deputy Clerk



ORIGINAL SIGNATURES:
FIRST TWO COPIES

MICHAEL J. SATZ
State Attorney

By: Kevin C. Frein
LUIZ R. MARTINEZ
Ass't State Attorney FL Bar # 059481

[] Broward County Courthouse
201 Southeast Sixth Street
Fort Lauderdale, FL 33301

[XX] SOUTH REGIONAL COURTHOUSE
3550 HOLLYWOOD BLVD., STE. #205
HOLLYWOOD, FLORIDA 33021.

Telephone: 954/ 831-0340

[] SERVED [] NOT SERVED TIME _____ M., DATE _____, 19 _____

State Attorney Investigator/Deputy Sheriff

ORIGINAL-CLERK

14