

**\*2022-024387\***

ACN: 2022-024387

Submitting Agency: CPD Homicide Unit

Submitting Rep: Raymond Diaz

**Case Note:**

FIT # 22-01 Occurred on January 27, 2022 at 1940 West 96th Street Cleveland, Ohio

**Individuals:**

Paul Marks - Victim

Zachery Edwards - Suspect

**Offenses:**

assaultpo - Assault on a P.O. (27 Jan 2022)

1940 West 96th Street, Cleveland, OH, USA 44111

**Evidence List:**

- 1 - Glock Model 17 with Serial # BAGR489 (1)  
Deputy Bailiff Kenyon Jones Service Weapon
- 2 - Kitchen Knife with 5" Blade (4)  
Recovered at crime scene test for DNA
- 3 - Kitchen Knife with 7" Blade (8)  
Recovered at crime scene to be tested for DNA
- 4 - Wooden Club with Suspected Blood (9)  
Recovered at crime scene used to strike Victim's by suspect
- 5 - Swabs of Suspected Blood (10)  
Recovered at crime scene
- 6 - Fired Bullet (11)  
Recovered at crime scene to be compared to recovered firearm
- 7 - SPent 9mm Luger Cartridge Casing (12)  
Recovered at crime scene to be compared to recovered firearm

**Requests:**

- 1 - DNA - DNA Testing
- 2 - FirearmsToolmarks - FA Comparison/Examination
- 3 - FirearmsToolmarks - Test Fire
- 4 - FirearmsToolmarks - NIBIN Entry



# Cuyahoga County Regional Forensic Science Laboratory

## Evidence Submission Sheet

This form must be completed for all cases except for those requiring **only** Drug Testing and/or Test Firing of Firearms.

CCRFSL Case Number:
Agency Case Number: <b>2022-024387</b>

Note: No DNA, Drug or Fingerprint testing will be performed on 'Property Found'.

<b>NEW CASE</b> <input checked="" type="checkbox"/>	<b>ADD'L EVI.</b> <input type="checkbox"/>	<b>Submitting Agency:</b> Cleveland Police Department	<b>Submitting Officer</b> Det. Raymond Diaz # 1001
<b>Investigating Officer/Contact Person:</b> Det. Raymond Diaz # 1001		<b>Phone Number:</b> 216-623-6217	<b>Email:</b> rdiaz@city.cleveland.oh.us
<b>Offense:</b> Homicide		<b>Date of Offense/Discovery</b> 01/27/2022	<b>Synopsis Attached?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Name:</b> <input checked="" type="checkbox"/> Victim <input type="checkbox"/> Suspect Paul Marks		<b>D.O.B.:</b> 12/30/1966	<b>Name:</b> <input type="checkbox"/> Victim <input checked="" type="checkbox"/> Suspect Zachery Edwards
		<b>D.O.B.:</b> 11/23/1985	

**Requested Testing:** (Note: CCRFSL may refuse any testing considered unsuitable/unacceptable as per CCRFSL Evidence Submission Policies)

List Item Numbers ↓ (Check Appropriate Testing →)	DNA	Finger prints	Drug Chemistry	Trace	GSR	Firearms	NIBIN	Test Fire
Item 1 Glock 17 (BAGR489)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Item 4 Kitchen Knife 5" Blade	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Item 8 Kitchen Knife 7" Blade	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Item 9 Wood Club W. Susp. Blood	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Item 10 Swabs Susp. Blood	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Item 11 Fired Bullet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Item 12 Spent 9mm Luger Casing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Please specify your comparison requests (What items need to be compared):**

Compare Item 1 Glock 17 (BAGR489) to recovered Fired Bullet (Item 11) and recovered Spent 9mm Cartridge Casing (Item 12) Compare DNA from both Kitchen Knives (Item 4 & 8) to DNA from Suspect Zachery Edwards. Compare DNA from Wooden Club (Item 9) to suspect Zachery Edwards.

**Information Required for Firearms Testing:**

1. Is there any reason why the submitted ammunition cannot be used for test firing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No								
2. Are the submitted cartridge case(s) evidence or test fire(s)?	<input checked="" type="checkbox"/> Evidence : _____ <input type="checkbox"/> Test Fire(s) : _____								
<b>If test fire(s), provide the firearm information:</b>	<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 25%;">Make</td> <td style="width: 25%;">Model</td> <td style="width: 25%;">Serial Number</td> <td style="width: 25%;">Caliber</td> </tr> <tr> <td>Glock</td> <td>17</td> <td>BAGR489</td> <td>9</td> </tr> </table>	Make	Model	Serial Number	Caliber	Glock	17	BAGR489	9
Make	Model	Serial Number	Caliber						
Glock	17	BAGR489	9						

**Information Required for DNA, Fingerprints and/or Trace Analysis:**

1. If hair, fibers, paint analysis is requested, have known samples been provided?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
2. Was the evidence item(s) collected from the suspect's person or in suspect's possession when collected by law enforcement?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
3. Could the DNA or Fingerprints on the evidence be from an individual who is not a suspect? (e.g. police officer collecting the evidence/ witness/ victim's partner who is not a suspect)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, have elimination Fingerprints and DNA standards been submitted?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

**Please complete page 2 for all Non-Sexual Assault DNA Testing requests.**  
(Not required for non-DNA requests)



# Cuyahoga County Regional Forensic Science Laboratory Evidence Submission Sheet

CCRFSL Case Number:
Agency Case Number: <b>2022-024387</b>

**Information Required for Non-Sexual Assault DNA Testing:** (For sexual assaults, please complete the 'DNA Sexual Assault Ev. Sub. Checklist'.)

1. Has the permission to consume the touch DNA evidence been submitted?  Yes  No If no, provide Information below\*  
 (Testing will not start until the permission to consume is received for all touch DNA evidence.)  
 \*Consumption Permission to be granted by: Pors. Koscko

2. Any weapon used?  Yes  No If yes, explain: Firearm/ Wooden Club

3. Was anyone bleeding?  Victim  Subject  Other (explain): \_\_\_\_\_

4. Victim's relationship to subject: Unknown

5. Have the victim and subject had prior physical contact?  Yes  No  Unknown  
 If yes, explain: \_\_\_\_\_

6. Did the victim/subject have prior contact with the crime scene? Victim:  Yes  No  Unknown  
 Subject:  Yes  No  Unknown

7. Location where the victim was found: Hallway

8. Approximate time length between the assault/crime and discovery of the victim/evidence: \_\_\_\_\_

9. If suspect's clothing is submitted, was it worn during the alleged offense?  Yes  No

10. Were the evidence items collected at or near the crime scene?  Yes- Item(s)#: \_\_\_\_\_  
 If no, provide location and relationship of these items to the crime:  No- Item(s)#: \_\_\_\_\_

11. Suspect's standard submitted?  Yes  No

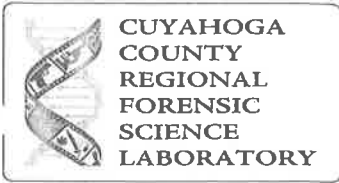
12. Please attach or write a short summary of the crime clearly mentioning the connection of the evidence items to the crime:  
 FIT # 22-01 occurred on Thursday January 27, 2022 at 1940 West 96th Street Cleveland, Ohio. A copy of the synopsis is attached with this report.

Compare Item 1 Glock 17 (BAGR489) to recovered Fired Bullet (Item 11) and recovered Spent 9mm Cartridge Casing (Item 12)  
 Compare DNA from both Kitchen Kives (Item 4 & 8) to DNA from Suspect Zachery Edwards. Compare DNA on Wooden Club to suspect Zachery Edwards. We learn that Edwards struck CHCB Paul Marks and Victim William Sheperd with the wooden club.

**Information provided by:**

Det. Raymond Diaz # 1001  
 Agency Representative

01/31/2022  
 Date



**CUYAHOGA  
COUNTY  
REGIONAL  
FORENSIC  
SCIENCE  
LABORATORY**

**Cuyahoga County Regional Forensic Science Laboratory  
11001 Cedar Avenue, Cleveland, Ohio 44106  
Phone: (216) 721 5610 Fax: (216) 707 3123**

**Inbound Evidence Receipt**

**EVIDENCE TRANSFER TRANSACTION**

Receipt ID: **125324**

Agency:	<b>CPD Homicide Unit</b>
Evidence Relinquished By:	<b>Pivarnik, Cindy</b>
Evidence Received By:	<b>Patterson, Abigail</b>
VIA:	
Note:	
Date & Time:	<b>2/1/2022 10:23:56AM</b>
Operator:	<b>Patterson, Abigail</b>

**LABORATORY CASE INFORMATION**

Total Number of Evidence: **7**

<u>Lab Case #</u>	<u>Lab Evid #</u>	<u>Agency Case #</u>	<u>Agency Evid #</u>	<u>Description</u>
2022-000887	035	2022-024387	1	Glock Model 17 with Serial # BAGR489
2022-000887	036	2022-024387	4	Kitchen Knife with 5" Blade
2022-000887	037	2022-024387	8	Kitchen Knife with 7" Blade
2022-000887	038	2022-024387	9	Wooden Club with Suspected Blood
2022-000887	039	2022-024387	10	Swabs of Suspected Blood
2022-000887	040	2022-024387	11	Fired Bullet
2022-000887	041	2022-024387	12	SPent 9mm Luger Cartridge Casing

**SIGNATURES**

<b>Evidence Relinquished By:</b> Pivarnik, Cindy 	<b>Evidence Received By:</b> Patterson, Abigail 
Signature _____ Date: 02/01/2022	Signature _____ Date: 02/01/2022



# Property Receipt

Print Date/Time: 02/01/2022 08:24  
Login ID: diazr  
Cleveland Division of Police  
ORI Number: OHCLP0000

Date Received	Case Number	Property Code(s)	Property Type	Description	Facility	Storage Location	Tag/Item Number
01/27/2022	2022-00024387	Evidence (Non OIBRS)	Shellcasings Or Bullets	1 Fired WIN 9mm Luger Cartridge Case	Crime Scene and Records	Property Room	2022-00024387/12 ✓
01/27/2022	2022-00024387	Evidence (Non OIBRS)	Shellcasings Or Bullets	1 Suspected Fired Bullet w/ Suspected Blood	Crime Scene and Records	Property Room	2022-00024387/11 ✓
01/27/2022	2022-00024387	Evidence (Non OIBRS)	DNA (Evidence Only)	1 Sample, 2 Swabs of Suspected Blood	Crime Scene and Records	Property Room	2022-00024387/10 ✓
01/27/2022	2022-00024387	Evidence (Non OIBRS)	Other	Wood Club w/Suspected Blood	Crime Scene and Records	Property Room	2022-00024387/9 ✓
01/27/2022	2022-00024387	Evidence (Non OIBRS)	Knife	Kitchen Knife w/ 7" Blade and Black Handle	Crime Scene and Records	Property Room	2022-00024387/8 ✓
01/27/2022	2022-00024387	Evidence (Non OIBRS)	Knife	Kitchen Knife w/ 5" Blade & Black Handle	Crime Scene and Records	Property Room	2022-00024387/4 ✓
01/27/2022	2022-00024387	Evidence (Non OIBRS)	Firearms		Homicide Unit	Property Room	2022-00024387/1 ✓

*Andy Purnell #2058*

Submitted By \_\_\_\_\_

Date 2-1-22

*Brandon Daiscell*  
Property Officer

Date 2/1/22