

|                                                                 |                                       |
|-----------------------------------------------------------------|---------------------------------------|
| <b>NATIONAL TRANSPORTATION SAFETY BOARD</b><br>EVIDENCE CONTROL | ACCIDENT NUMBER:<br><b>WPR23FA172</b> |
|-----------------------------------------------------------------|---------------------------------------|

For Use In All Modal Investigations

|                                                                                                                                          |                                 |                                                         |
|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|---------------------------------------------------------|
| OFFICE<br><br>Aviation Safety                                                                                                            | DATE OF ACCIDENT<br><br>4/29/23 | ACCIDENT LOCATION (City & State)<br><br>Los Angeles, CA |
| EVIDENCE OBTAINED BY:                                                                                                                    |                                 |                                                         |
| <input checked="" type="checkbox"/> EVIDENCE OBTAINED FROM:                                                                              | LOCATION OR PERSON INFORMATION  | DATE                                                    |
| <input type="checkbox"/> EVIDENCE RECEIVED FROM:                                                                                         | Accident site                   | 5/1/23                                                  |
| EVIDENCE CONTROL NUMBER<br><br>- IIC -                                                                                                   |                                 | GROUP                                                   |
| DESCRIPTION ( <input type="checkbox"/> BIN ITEM - HAS BEEN SEPARATED <input type="checkbox"/><br>iPad (model unknown), Aviation headset. |                                 |                                                         |

OWNER OR OWNER'S REPRESENTATIVE

|                                              |                             |
|----------------------------------------------|-----------------------------|
| FIRST NAME:<br><b>Rabbi Micahel</b>          | LAST NAME:<br><b>Gradon</b> |
| ADDRESS:                                     |                             |
| PHONE:                                       | EMAIL:                      |
| RETURNED <input checked="" type="checkbox"/> | DATE:<br>5/1/23             |
| CONTACT:                                     |                             |

CHAIN OF CUSTODY

|                                        |                                                        |                        |
|----------------------------------------|--------------------------------------------------------|------------------------|
| RELEASED BY:<br><b>Elliott Simpson</b> | RELEASED TO:<br><b>Rabbi Michael Gradon (Misaskim)</b> | DATE:<br><b>5/1/23</b> |
| PURPOSE:<br><b>Return</b>              |                                                        |                        |
| RELEASED BY:                           | RELEASED TO:                                           | DATE:                  |
| PURPOSE:                               |                                                        |                        |
| RELEASED BY:                           | RELEASED TO:                                           | DATE:                  |
| PURPOSE:                               |                                                        |                        |
| RELEASED BY:                           | RELEASED TO:                                           | DATE:                  |
| PURPOSE:                               |                                                        |                        |
| RELEASED BY:                           | RELEASED TO:                                           | DATE:                  |
| PURPOSE:                               |                                                        |                        |

|                                                                 |                                       |
|-----------------------------------------------------------------|---------------------------------------|
| <b>NATIONAL TRANSPORTATION SAFETY BOARD</b><br>EVIDENCE CONTROL | ACCIDENT NUMBER:<br><b>WPR23FA172</b> |
|-----------------------------------------------------------------|---------------------------------------|

For Use In All Modal Investigations

|                                                                                                            |                                 |                                                         |
|------------------------------------------------------------------------------------------------------------|---------------------------------|---------------------------------------------------------|
| OFFICE<br><br>Aviation Safety                                                                              | DATE OF ACCIDENT<br><br>4/29/23 | ACCIDENT LOCATION (City & State)<br><br>Los Angeles, CA |
| EVIDENCE OBTAINED BY:                                                                                      |                                 |                                                         |
| <input checked="" type="checkbox"/> EVIDENCE OBTAINED FROM:                                                | LOCATION OR PERSON INFORMATION  | DATE                                                    |
| <input type="checkbox"/> EVIDENCE RECEIVED FROM:                                                           | Wreckage                        | 5/3/23                                                  |
| EVIDENCE CONTROL NUMBER<br><br>- IIC -                                                                     |                                 | GROUP                                                   |
| DESCRIPTION ( <input type="checkbox"/> BIN ITEM - HAS BEEN SEPARATED <input type="checkbox"/><br>iPhone 12 |                                 |                                                         |

OWNER OR OWNER'S REPRESENTATIVE

|                                              |                      |
|----------------------------------------------|----------------------|
| FIRST NAME:<br>Tom                           | LAST NAME:<br>Lourie |
| ADDRESS:                                     |                      |
| PHONE:                                       | EMAIL:               |
| RETURNED <input checked="" type="checkbox"/> | DATE:<br>5/3/23      |
| CONTACT:                                     |                      |

CHAIN OF CUSTODY

|                                 |                            |                 |
|---------------------------------|----------------------------|-----------------|
| RELEASED BY:<br>Elliott Simpson | RELEASED TO:<br>Tom Lourie | DATE:<br>5/3/23 |
| PURPOSE:<br>Return              |                            |                 |
| RELEASED BY:                    | RELEASED TO:               | DATE:           |
| PURPOSE:                        |                            |                 |
| RELEASED BY:                    | RELEASED TO:               | DATE:           |
| PURPOSE:                        |                            |                 |
| RELEASED BY:                    | RELEASED TO:               | DATE:           |
| PURPOSE:                        |                            |                 |
| RELEASED BY:                    | RELEASED TO:               | DATE:           |
| PURPOSE:                        |                            |                 |