REPORT DATE	COLORADO BUREAU OF INVESTIGATION REPORT OF INVESTIGATION	CASE NUMBER				
February 26, 2024		IIA-23-05				
TYPE OF REPORT	REPORT BY	SECTION/UNIT				
Initial	Assistant Director Kellon Hassenstab	Forensic Services/Arvada				
INVESTIGATING AGEN	JT SIGNATURF.					
	NATURE OF CASE					
Internal Affairs Investigative Report						

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EXECUTIVE SUMMARY

In September of 2023, the Colorado Bureau of Investigation (CBI) Forensic Services (FS) section initiated a research project, conducted by an intern, in order to determine the scientific value of certain swabs taken for Sexual Assault Kits. During the course of this research project, an intern uncovered an anomaly in past DNA case work involving now-retired CBI member Criminal Investigator II (Forensic Scientist) Yvonne "Missy" Woods, a 29 year employee.

Additional anomalies were uncovered and examined internally, and

, of the CBI's Arvada Forensic Services laboratory, requested CBI Director Chris Schaefer initiate an internal affairs investigation on Friday, September 29, 2023. Specifically, noted more than 30 cases had been identified (at that time) in which technical data appeared to have been deleted since 2017. The present expressed her concern that this data may indicate intentional untruthfulness. The present also noted that the Quality Unit was conducting a full internal quality review to assess the impact this situation may have on case work.

On Tuesday, October 3, 2023, Director Schaefer requested an internal affairs investigation subsequent to the request from **Constitution**. CBI Investigations AD Kellon Hassenstab was assigned to the internal investigation. **CBI** served Woods with the OPS-6, Internal Affairs Investigative Advisement form and an Administrative Leave notice on Tuesday, October 3, 2023.

On Friday, October 6, 2023, an interview with **and the documentation** was conducted by AD Hassenstab to initiate this investigation. **Constitution** provided the documentation and context into a 2018 quality incident (Quality Incident Review – 38377) Woods was involved in, as well as her notification of and subsequent confrontation regarding this incident.

Specific to the 2018 incident, which appeared related to the data anomalies found during the 2023 review, the notes provided by **another and a set of the set of the**

At the time, Woods was removed from case work The Quality Manager Review portion of that report culminated in 2021 was interviewed on November 1, 2023,

and provided what had been learned of the anomalies specific to deletion of data/misreporting of

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results by Woods detected as of that date. At the time AD Hassenstab spoke with **the second** she described initial observations (using **the second** verbiage) of cases found internally that involved grouping trends found in the data. The initial trends involved data deletion and possible reagent blank tampering, data change and tampered with reagent blanks, an ignored entire run of data not recorded in the case record and tampered with reagent blanks, deleted data, deleted data and incorrectly reported no male DNA, deleted data and incorrectly the sample was not given more analysis, and deleted data and incorrectly additional troubleshooting not completed.

On November 1, 2023, Special Agent in Charge (SAC) Cory Latham of the Kansas Bureau of Investigation began assisting with this internal investigation. Woods officially retired from CBI employment on November 6, 2023. On November 7, 2023, the South Dakota Division of Criminal Investigation (DCI) agreed to conduct a criminal investigation into Woods' actions.

On November 8, 2023, SAC Latham and AD Hassenstab interviewed Woods, in the presence of her attorney, Ryan Brackley. Woods was afforded *Garrity* rights as she was within the window of time in which she could withdraw her retirement.



In conjunction with the FS data mining and audit of Woods' case work, interviews were conducted and documents were reviewed to obtain more context and information related to the decisions made during the 2018 QIR, by the involved CBI management and reviewers.

As of January 17, 2024, the number of known anomalies in Woods' work was documented as 224 between 2008-2023 impacting 652 cases between 2008-2023. Laboratory analysis is ongoing to determine the full extent of Woods' actions.

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REPORT Initial Investigative Steps

On Monday, October 2, 2023, I (Colorado Bureau of Investigation Assistant Director Kellon Hassenstab) was forwarded an e-mail from Colorado Bureau of Investigation (CBI) Director Chris Schaefer containing a "Notice of Paid Administrative Leave" regarding CBI Forensic Scientist (Criminal Investigator II) Yvonne "Missy" Woods. I saved a copy of this document for this case file, as **Exhibit IIA-23-05-B**.

I noted the document articulated that Woods was to be placed on Administrative Leave on Tuesday, October 3, 2023, for "alleged untruthful conduct in the workplace surrounding possible deleted data and mis-reporting of the results."

On Tuesday, October 3, 2023, I spoke with a who advised me he was forwarding an internal affairs investigation request by e-mail from Director Schaefer. told me that was scheduled to meet with Woods on the same date and personally serve Woods with the Notice of Paid Administrative Leave.

The email request for the internal affairs investigation was saved and included with this report as **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In reviewing the e-mail thread, I noted that **Exhibit IIA-23-05-A.** In review to assess the impact this situation may have on casework.

At approximately 10:48 AM, I reached by telephone at the second s

The applicable CBI Code of Conduct Directive, along with the applicable Internal Affairs Directive, have been included with this report as **Exhibit IIA-23-05-C**.

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I later scheduled an initial investigative interview with on Friday, October 6, 2023, at 10:30 am.

On Friday, October 6, 2023, I received an e-mail from Director Schaefer. The e-mail contained his correspondence from Denver-based attorney Ryan Brackley. Attorney Brackley provided Director Schaefer with a PDF attachment containing notice Woods is on vacation from October 7, 2023, to October 19, 2023 (note: this information was already known and confirmed with Woods by **Directors**). The e-mail, in summary, pledges cooperation with the internal affairs investigation. A PDF copy of the e-mail correspondence, as well as the attachment, is attached as **Exhibit IIA-23-05-D**.

Multiple witness interviews and a subject interview occurred during the investigation, along with document and data review. All interviews were audio-recorded and have been included with this report as a thumb drive marked **Exhibit IIA-23-05-F**. Additionally, an electronic version of this case file is contained in the same thumb drive. In conjunction with being interviewed, all current CBI member witnesses electronically signed a Form OPS-2, *Truthfulness and Confidentiality Agreement*. All signed witness advisements have been included with this report as **Exhibit IIA-23-05-E**.

WITNESS INTERVIEWS AND FOLLOW-UP

Summaries of the interviews follow, in the order in which they were completed. Additionally, significant items of follow-up and events related to this investigation appear in chronological order in this report.

The interview summaries are a synopsis of the information gathered and may be presented in non-chronological order and/or utilize paraphrasing for the sake of clarity.

Please refer to the aforementioned audio files for the complete contents of these conversations.

Interview of

(Forensic Services):

The interview began on Friday, October 6, 2023, at approximately 10:30 AM, via videoconference. While speaking with **Sector**, I explained and she later electronically signed Form OPS-2, *Truthfulness and Confidentiality Agreement*, and returned it to me via e-mail. The form was later printed, signed by me, and added to the investigation file.

The interview was audio-recorded and ended at approximately 11:20 AM; the following is a summary of statement, which may utilize paraphrasing:

• pro

provided context and background information related to the 2018 Quality

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Incident Review (QIR), and the issues involved in that incident. explained the step of DNA quantification (quant.) at the beginning of our conversation. The documents associated with this incident, which involved Woods, are included in this file and are reflective of the internal Forensic Services documentation from the 2018 incident.

- **Control** then explained the origin of the anomalies that were recently detected. She stated a CBI Intern (later determined to be **Control**) was involved in a project in which she was researching specific (historical) CBI Forensic Services cases involving DNA. While conducting this research, **Control** reportedly observed values were missing in specific data sets, and asked a CBI supervisor about the issue. We discussed the origin of this project later in the interview in detail.
- As the historical data and results were examined, the results were atypical and did not indicate procedure was followed correctly, specifically in the case work conducted by Woods. At the time we spoke, there were 37 instances found of data anomalies in Woods' case work.
- and contacted Woods and discussed the matter further with her on September 28, 2023, at the CBI Arvada Laboratory. In this case file.
- said they asked Woods for an explanation of the problems detected. said Woods described the situation which didn't make sense to based on the workflow and the common denominator of these cases involving low-level (male) samples in DNA. For efferred to her notes and remembered Woods asked to be shown examples, which showed her. Said the overwhelming theme in Woods' responses
- told me she met with Woods at Woods' residence between approximately 12:10 pm and 12:35 pm on October 3, 2023. This interaction is also covered in notes. also noted that
- **Control** and I discussed the 2018 QIR again, and how the process works involving technical reviewers. She noted the issue in the 2018 situation was detected by the technical reviewer extracting data directly from the DNA instrument to compare to Woods' data in her work. **Control** said there is a written procedure regarding technical reviews.

described the QIR documentation stored within the quality control system

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with forensic services.

said

- then explained how the case management system works. She explained a tracking audit trail exists in the software, which can show differences in the uploaded versions of the DNA workbook (described as an excel workbook that is custom for DNA processing), as well as the lab report.
- explained her knowledge of the chronology of intern project later in the interview was "third hand" so it is explained in detail in the and interview sections.
- I asked the work of the situation was compared with mistakes a typical forensic scientist might make. So and the typical scientist makes a couple of minor mistakes per year, which do not impact case work. So a reiterated she didn't think this was a "copy-paste" type of error, which is also informed by speaking with the so on how that process occurs.
- noted Woods' may have testified to information that was not correct subsequent to her reporting.
- I asked to describe more detail about her and initial initial conversation with Woods on September 28, 2023. It should be noted, as described in the next section, the notes regarding this conversation created at the time by and and
 - are included in Exhibit IIA-23-05-H.
- said her questions for Woods at the time were based on the initial data gathering. Said Woods was done with work for the day and was requested to come back to the CBI Arvada laboratory. Said Said Said Started the conversation about more missing data regarding low-level (in quantity) samples with male DNA. At that time, Woods was asked for an explanation of the general issues.

•	characterized Woods' response as said I asked	
	to describe Woods' response further.	
•	said most of the responses were by Woods during this	
	conversation.	

• said the conversation concluded with Woods being provided with logistics about being on leave.

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again discussed going to Woods' residence to put her on leave on October 3,
2023. said Woods told her that she (Woods)

and Internal Affairs notification) with Woods.

•		discussed	d a state	ement fi	rom V	Woods	5				
							said she	didn't	t respond to	o that	
	statement.		talke	d about	Woo	ods					
									said Wood	ls mentio	oned
								also	said Wood	s talked	
								and		said	

interacting with victims is not allowed by lab policy.

- As the interview concluded, **Constant and advised me she had not heard of others making** the types of errors Woods has made. She also said Woods has been using the computer system since 2009 and should have extensive experience with it.
- also noted Woods is a high-producer, and works a lot of overtime. said other scientists believe that Woods cuts corners in order to be a top producer. also described Woods as reliable and noted she has been asked to work on complex and cold cases.
- I asked if she believed Woods' data could be produced unintentionally and/or accidentally. She said it was not probable and almost not possible (based on what was known at time).

Documents Sent by

During the interview with **Constant of**, I asked that she send me documents regarding the 2018 Quality Incident Review (QIR 38377), as well as her notes regarding her conversations with Woods regarding this incident/allegation. Additionally, **Sector 10** sent me a scanned document containing OPS-6 Internal Affairs Investigative Advisement, indicating **Sector 10** served Woods with the document on October 3, 2023. This document is retained as **Exhibit IIA-23-05-I.**

On Monday, October 9, 2023, I received these documents by e-mail from **Constant of**. I reviewed and printed three documents that were created regarding QIR 38377 as **Exhibit IIA-23-05-G**. Additionally, I printed and reviewed a document containing notes, labeled as **Exhibit IIA-23-05-H**.

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Regarding QIR 38377, I reviewed what was provided and noted that the issue occurred on July 23, 2018, and was initiated by the fourth of the state of the state of the state of the state of July 23, 2018, and was initiated by the state of July 23, 2018, the notes indicate on July 23, 2018, that she (the state of the state of July 23, 2018, the state of July 24, 201

case D84-132, found upon a technical review of Woods' batch notes.

The notes indicate Woods was "confronted by management" about the "deletion of values on a quant worksheet" during the week of July 22, 2018. Woods "stated

Woods was removed from case work

Additionally, the notes indicate that during the week of November 4, 2018, Woods began active case work again, but was not permitted to work overtime until December.

As of June 7, 2021, **and the event of the event in 2018**." The corrective actions associated with the originating incident are described, as well as the conclusion. The Quality Manager Review portion of the report culminates

Two other memorandum-style documents were provided by **Security** related to QIR 38377. One is entitled "Discussion with Missy 7/26/18" and the other starts with the sentence "**Security** spoke w/me and **Security** at 9am." These documents provide further detail and context for the information presented on QIR 38377. Of note, in the document that starts with the sentence "**Security** spoke w/me and **Security** at 9am" I observed that **Security** is noted as telling the author, presumed to be **Security**, that "After setting up the 2nd quant (Manual), she (Woods) did notice it but didn't want to go back and amp that RBS2, so she deleted the values."

Contact with

After interviewing

, I contacted CBI Forensic Services

via phone. I asked **constant** if he could provide details to me regarding the anticipated completion of the forensic services investigation and analysis into Woods' past case work. He stated a team was working on this project and he anticipated it would take multiple weeks.

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On Thursday, October 12, 2023, I spoke with **Construction** in person and confirmed the quality investigation was not completed and would take additional time. I asked that he inform me when the investigation had conclusions and information for me to review. Additionally, I asked **Construction** who the best person was for me to speak with to understand the DNA processing procedures and the internal forensic services investigation, and he stated **Construction** is the expert in this area.

Interview of Services):

The interview began on Wednesday, November 1, 2023, at approximately 9:00 AM, via videoconference. While speaking with **Sector** I explained and she later electronically signed Form OPS-2, *Truthfulness and Confidentiality Agreement,* and returned it to me via e-mail. The form was later printed, signed by me, and added to the investigation file.

The interview was audio-recorded and ended at approximately 10:40 AM; the following is a summary of statement, which may utilize paraphrasing:

- provided the background information regarding how this situation came to the attention of forensic services employees. For referred to the QIR associated with this incident (which was escalated to CAR Corrective Action Review 79452) document that she has been working on to assist her statement in this area.
- said on Tuesday, September 19, 2023, she was contacted by regarding an issue that set to be the observed while working on a data mining project regarding vestibular swabs (see the report section regarding for further details). We was entering DNA quantification data, and as she was engaged in this work, set on noticed that in historical case D18-1206, item 1.8.1 had a male target cycle threshold (CT) value and not a male quant. value, which she thought was odd. So brought this to attention.
- clarified that a data set cannot have a CT value without a quant. value. This is significant because this data anomaly pattern was observed in the case data of Woods under review. added that an analysis can't have one value without the other value, and later said this had been confirmed with the DNA instrument's manufacturer.
 - said her initial thought was this irregularity was extremely unusual and asked that highlight the irregularity for quality control purposes.
- said this project was involved in was initiated by an idea forensic scientist had for research.

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- When the issue was brought to **attention**, she asked **attention** to look into it and find out which analyst worked on the case. It was found to be Woods. **also** contacted **attention**, to find out if **attention** knew if it was possible to have a CT value without a quant. value and **attention** thought it was not.
- **The state of the second state of the second**
- **Sector** said this investigation found that by CBI practice, all data had not been backed up from the DNA instruments. This limits the ability to export the original data off of the instrument from August 2019 to the present. It should be noted, not having this data available prevented complete comparisons of original, instrument-based data with what is contained in Woods' reports.
- At the time of the interview, the review involved the entire DNA technical team, which consisted of **and**, and **base**. The team initially attempted to find a "bookend" in which this problem started and finished. I asked **base** if the team looked at data from analysts other than Woods and she said they did, without seeing any similar data problems.
- also explained the historical data is not stored on any server, but rather it is stored on the DNA instrument itself. In noted the status of the data on the instrument in the CBI Arvada laboratory. She stated that the in the laboratory

told her she had been advised to delete the data during quarterly maintenance. said this practice predated her employment with CBI, and she was not aware of it (until recently).

- I followed up with **a set of the set of th**
- said DNA batch notes were researched between 2008 and 2023, specific to

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Woods. The significance of 2008 is that **a** asked the team to research the anomalies, and then review one year prior to the last instance of the data problem. The last instance was found in 2009. **a** stated the current Laboratory Information Management System (LIMS) system came in January of 2008, and everything prior in on paper files. *It should be noted, Woods reported to me during my interview with her*

• I asked **a set of** if the laboratory procedures have changed over time, and she said they had. She said the review was being done in the context of what would have been the current procedure at the time (meaning the actions believed to have been taken by Woods were evaluated under the SOPs that were in place at the time they occurred). I asked

if exported data can ever be edited by the analyst. She said within the laboratory's accreditation, the analyst must note the reason if data is not being used, in all cases.

- On October 20, 2023, **and an oted was brought on to the review team at that** point. **Solution** said the team began exporting the data from the instrument to compare with what was found in the LIMS.
- During the interview, I also requested that walk me through the process of DNA analysis, from start to finish, which she did to enhance my understanding of this issue. Please refer to the audio file for werbal description of how DNA analysis is done in forensic science.
- **Constitution** and I extensively discussed the "Quant Data Trends Observed" Google sheet file that she shared with me. Understanding this document will evolve as the investigation progresses, I saved and printed the version we discussed during this conversation. **Solution** said the purpose of this document is to provide a high-level overview and observation of the trends found within the inconsistencies in Woods' case work. **Solution** later told me that she is confident this table does not list the extent of the problems found in Woods' case work and that additional problems are likely to be uncovered as the team continues its review.
- This table of the analyses includes a written observation of the data trend, the supporting evidence found to back up the observation, the outcome of the scenario, as well as the impact and issue identified. The second to last column noted the number of cases found in that trend as of the date of the interview.
- Additionally, during this conversation, **where** referred to image files created of examples of what the data problems would visually appear as within Woods' reporting and case files. These image files were in five of the eleven rows of data trends discussed.
- I asked to explain reagent blanks. She described this as a control and said this

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sample should not contain DNA. It is taken through the entire DNA analysis process to show that there is no contamination within the run of DNA. **Solution** said the reagent is a tube with nothing in it, other than the chemicals used for extraction. I asked **Solution** how often a reagent blank comes back with unexpected DNA that must be troubleshooted with the technical team. She said this instance can occur a couple of times per month. When this occurs, it is extra work on behalf of the team to attempt to determine how it occurred and resolve it.

- Regarding row 2, the issue relates to reagent blanks with a CT value, with no quant. value, which is not possible per research. 153 impacted cases across 8 DNA batches are identified, in which the troubleshooting step that should have occurred, did not. questioned if the reagent blanks were tampered with, and I asked her to explain. She said some of the reagent blanks appear to have been processed appropriately, with values detected, but the data found is inconsistent.
- I asked the box someone can delete data within the DNA analysis process. Solution said the data is exported appropriately from the instrument, but data is removed afterward. This data removal would require manual editing of the .XLS file cells. Solutions said in her opinion there is no need to copy and paste data in any way (so this was not a likely source of error). She said the importing of data is an automated process, through the use of a button, that does not require further human intervention.
- Regarding row 3, the observation is that the reagent blank quant. data has been altered (by orders of magnitude) from what is present on the instrument, in the case notes.

stated a batch from 2020 was spot-checked against DNA analysis workbooks, and quant. values in the reagent blank are altered to show as reduced, and possibly were diluted. said someone would need to enter the cell in the data workbook and physically type and/or change the numbers. All 17 cases were part of the same batch process in this instance.

• Regarding row 4, the DNA batch data was "requanted" as proven by the raw data from the instrument. This occurred in 3 known batches, as Woods then did the quanting again on a different day or another instrument. Said said this is a major problem in the DNA analysis process, especially because this was not documented or reflected in any reporting. Said the data indicates there was no problem with the instrument shown in the data.

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the step of troubleshooting.

- Regarding row 5, four cases are shown and either a CT was present without a quant, or there is a quant without a CT. **Solution** said the cases were worked as expected and she's not sure what a motivation would have been to engage in this type of data reporting.
- Regarding row 6, **Weight** stated these were female reference samples in which Woods ignored the male DNA present (she later described instances in which this could have occurred). This procedure has since changed since Woods' results, but Woods actions at the time were not in alignment with policy, although this is the current procedure. Nine cases were impacted.
- Regarding row 7, said these cases involved items from a female victim, in which the male DNA present may have been probative. The reporting was inaccurate according to because it stated no male DNA was present, which doesn't accurately communicate additional testing may be possible with the male DNA. Other cases present in the same batch, have the accurate data, which was cross-referenced to achieve this confirmation of inaccurate reporting.
- Regarding row 8, the male values were also deleted, possibly related to a female hair control sample in a case. The troubleshooting that should have occurred did not, but said she did not know the details of the case that could have precipitated this behavior.
- Regarding row 9, the associated image shows the four rows that must be present for an internal control sample. For the case associated with this row, the male target row is deleted. Cross-referencing the data in other cases revealed this data, but regardless the male target row should not be deleted. Said the row should always exist, and at least be undetermined.
- Regarding row 10, within the four rows of data found in the sample, either the small or large autosomal values are missing, also indicating deletion. These cases were worked as expected, however.
- Regarding row 11, said something was likely wrong in the DNA process. After two attempts an extraction occurred, with no troubleshooting.
- Regarding row 12, within the quant. data, the male-to-female ratio is deleted out of the data in one case. The word "RATIO" was present instead of a number (i.e. one in 300). The number value was cross-referenced in another case to determine RATIO was overwritten.
- I printed these five example image files for a record of the specific examples and I reviewed and discussed during this interview. These files are all "PNG" image files and include Difference between versions of workbook.PNG, Data manipulation capture.PNG,

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Repeated quants.PNG, Missing Y value.PNG, and Y row missing.PNG.

- Following our discussion of the "Quant Data Trends Observed" Google sheet, I asked to make some observations regarding the significance of some of the information that had been uncovered.
- said she could not consider any of the above-listed data as a "human error" and said that it was intentional manipulation and alteration of data. said this cannot be done accidentally, and stated several times she believes it is intentional.
- said lack of skill with a computer cannot explain any of this either.
- said she has never experienced this data manipulation in her entire career.
- said deleting data increases the number of cases the scientist can work on because they are not spending time troubleshooting.
- said she was not present at CBI for the 2018 QIR, but when she was hired at CBI had the QIR in her Qualtrax. She said she reviewed that QIR and noted Woods' documented admission that the data deletion was not accidental.
- I finished the interview by asking the peer (technical) reviewers should have caught some of this activity. The said she was aware the source observed this instance during DNA batch note review in 2014/2015 and no QIR occurred. The said she has seen instances within LIMS in which the batch notes have been changed after review.

noted if a value was altered it could not be detected, but ideally missing values should have been seen (during review).

The document and images and I discussed during the interview were printed and added to the investigative file. Exhibit IIA-23-05-J consists of a document with a table referred to as "Quant Data Trends Observed" as well as printed versions of the following images:

- Difference between versions of workbook.PNG This image indicates a value in the T. Large Autosomal column of 36.48365 on the left side of the page, with "Undetermined" in the column on the right side of the page – as described by **Second** there should always be both a cycle threshold and quant. value, without either missing. This image shows different versions of the DNA workbook, with the fields on the left being from the instrument. In Malone's opinion, someone would have had to type the word "Undetermined" in the cell where there was previously a number from the instrument.
- Data manipulation capture.PNG This image captures outright edited data containing substantially reduced quant. values in the reagent blanks.
- Repeated quants.PNG This image captures an entire run that was re-run, per with the reagent blanks in the second run replacing the first run quant. values. conclusion is that the reagent blanks were tampered with, either with a dilution or

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replacement.

- Missing Y value.PNG This image depicts the T.Y (target Y) value missing, which according to produces a report that inaccurately reports no male DNA.
- Y row missing.PNG This image depicts the T.Y (target Y) row missing from the data, which cannot occur per without deletion.

It should be noted that the printed version of the "Quant Data Trends Observed" document was the one discussed by **and I**, with the full anticipation it would be updated and finalized at a later date once the entirety of the quality review was completed.

The initial observations (using **basic of** verbiage) regarding this document were that 153 cases had issues of data deleted and possible reagent blank tampering (row 2), 17 cases with deliberate data change and tampered with reagent blanks (row 3), 24 cases involving a deliberately ignored entire run of data not recorded in the case record and tampered with reagent blanks (row 4), 4 cases of deleted data (row 5), 9 cases of deleted data (row 6), 8 cases of deleted data and incorrectly reported no male DNA (row 7), 2 cases of deleted data (row 9), 6 cases of deleted data (row 10), 1 case of deleted data and incorrectly additional troubleshooting not completed (row 11), and 1 additional case of deleted data (row 12).

Credibility Disclosure Notification to Attorney Brackley:

Director Schaefer provided me his e-mail correspondence to Attorney Brackley regarding sending District Attorneys across Colorado a credibility disclosure on Monday, November 6, 2023. I printed and added this document to the case file as **Exhibit IIA-23-05-K**.

Retirement of Yvonne "Missy" Woods:

On Monday, November 6, 2023, Director Schaefer forwarded me the voluntary resignation form provided to him regarding Woods. The form, entitled "Confirmation of Resignation and Advisement of Appeal Rights" indicates Woods' retirement is effective November 6, 2023. Also indicated, by Woods on the form, is that her voluntary resignation is in lieu of disciplinary action. I placed this document as **Exhibit IIA-23-05-L**.

Internal Communication and Press Release regarding Yvonne "Missy" Woods:

On Monday, November 6, 2023, Director Schaefer sent an internal e-mail, with the subject line "Important Update." This e-mail contained information from Director Schaefer, as well as the text of a press release regarding Woods.

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I attached the e-mail to this file, and entered it as **Exhibit IIA-23-05-M**. The text of the correspondence is as follows (italicized):

Colleagues,

I want to share with you a news release that was just sent to the media related to a former member of the Forensic Services Section. Because of the nature of the allegation and the comprehensive investigative process, details cannot be disclosed at this time.

The allegations made against this former employee are serious, and may prompt calls from concerned citizens or the media. For general inquiries, direct calls to our dedicated line: 303-239-4556, designed for messages and prompt responses. Queries from the public safety community regarding this scientist's cases should be directed to Denver Lab Director Lisa Yoshida. All media inquiries should be immediately directed to Susan Medina.

Deputy Director Lance Allen and I have already met with the Forensic Services team for an all-hands meeting. We provided them with an update, listened to their concerns, offered support, and assured them that we have confidence in them and their work.

During this challenging period for our organization, I am confident that the combined efforts of the thorough criminal and internal affairs investigations will provide us with a comprehensive understanding of the situation. This will enable us to progress with an unwavering commitment to integrity and the delivery of exceptional work across all departments. Please be assured that this incident does not diminish the exceptional work that you consistently contribute to our organization and the citizens of Colorado on a daily basis.

As I stated previously, we can't provide any additional information at this time pending the ongoing investigations. However, please feel free to reach out to any member of CBI leadership, or the CBI peer support team if we can be of assistance to you.

Chris

Former CBI Forensic Scientist Under Investigation

A former Colorado Bureau of Investigation (CBI) forensic scientist is the subject of an internal affairs and criminal investigation after discovering anomalies in her work as

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part of DNA testing in the lab. The anomalies were discovered while reviewing a sampling of cases as part of an internal process.

Yvonne "Missy" Woods, a 29-year veteran of CBI's Forensic Services section is no longer an employee of the Colorado Bureau of Investigation.

CBI is currently conducting an Internal Affairs investigation in conjunction with experts from the Kansas Bureau of Investigation. Additionally, the CBI is working to identify an outside state investigative agency to conduct a criminal investigation.

As part of this comprehensive investigation a meticulous review of Woods' work is being conducted. Additionally, CBI Forensic Service is undertaking an exhaustive review of its testing procedures and processes to maintain confidence in its integrity as a forensic lab. "These are extremely serious allegations, and I want to assure the public and our public safety partners that the CBI is committed to conducting a complete review of this matter to ensure the integrity of this critical function remains intact." said Department of Public Safety Executive Director Stan Hilkey.

The CBI is in the process of notifying its public safety partners as it continues to review the cases potentially impacted.

The CBI Forensic Services section is an ISO 17025 accredited laboratory committed to quality and transparency. The Forensic Services section is in contact with their accreditation body ANSI National Accreditation Board (ANAB) about this investigation. The CBI Forensic Services section was first accredited in 2004 and moved to ISO 17025 accreditation in 2015. Forensic Services completed an onsite reaccreditation assessment in April 2023 and received re-accreditation.

Because this is an active investigation no further information can be provided at this time.

Initial Assignment of Assistance by Kansas Bureau of Investigation:

On Wednesday, November 1, 2023, CBI Forensic Services DD Lance Allen informed me by email that Kansas Bureau of Investigation (KBI) Special Agent in Charge (SAC) Cory Latham would be assisting me with this internal affairs investigation. This was previously arranged/approved by Director Schaefer.

I later learned SAC Latham was a DNA scientist early in his career, prior to becoming a law enforcement officer at KBI. SAC Latham and I had several phone conversations about the investigation and the planned interview with Woods. Additionally, I understood that SAC

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Latham planned on speaking to **directly** directly to gain an understanding of the technical portions of this investigation as well.

Upon meeting SAC Latham in person on Wednesday, November 8, 2023, SAC Latham signed, and I retained, OPS-7, which appointed SAC Latham to a temporary assignment as an internal affairs investigator for CBI. The document is retained as **Exhibit IIA-23-05-N**.

Criminal Investigation by South Dakota Division of Criminal Investigation:

On Tuesday, November 7, 2023, Director Schaefer advised me that the South Dakota Division of Criminal Investigation (DCI) would be conducting a criminal investigation into Woods and provided me with Special Agent BJ George at the second state as the point of contact.

On Thursday, November 9, 2023, Director Schaefer copied me on an email to South Dakota DCI Director Dan Satterlee officially requesting South Dakota DCI's assistance. I printed this document and retained it as **Exhibit IIA-23-05-O**.

Internal Affairs Interview of Yvonne "Missy" Woods:

Woods arrived at CBI headquarters around 2:55 pm on Wednesday, November 8, 2023. KBI SAC Cory Latham (assigned as a temporary internal affairs investigator/subject matter expert) met Woods, Attorney Ryan Brackley, and I in the fourth-floor conference room within CBI investigations at 690 Kipling St, Lakewood, Colorado.

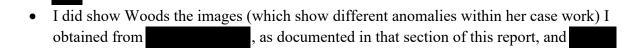
The interview began at approximately 3:00 PM, in the conference room. While speaking with Woods, I explained and she signed Form OPS-3, *Administrative Advisement* at 3:00 PM. As previously noted, the Administrative Advisement form was provided given that Woods could revoke her retirement and potentially regain her employment rights at CBI. The form was later added to the investigation file in **Exhibit IIA-23-05-P**.

The interview was separately audio and video recorded and ended at approximately 5:20 PM. The audio recording was later transcribed using the SpeakWrite transcription service, and the video file was retained in this case file. The transcription document was reviewed by myself and also added to the file in **Exhibit IIA-23-05-P.** It should be noted portions of the transcription document contain inaudible portions of the conversation, as indicated by "*" within the document.

The following is a non-chronological summary of Woods' statement, which utilizes paraphrasing – please refer to the transcription for full context and conversation:

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• It should be noted that for approximately the first hour and thirty minutes of the interview,



- As Woods began providing information,
- •

Yvonne "Missy" Woods:

Ivonne missy woods.		
Assistant Director Kellon Hassenstab:	: Okay.	
Yvonne "Missy" Woods:		

• SAC Latham then asks Woods about the Y (male) amplification not being done:

SAC Cory Latham: See, one of the things that jumped out at me when I looked over the data was the notion that, because I asked you the question earlier, the sorting, the cutting and pasting and you told me that that occurs in big quantitation level or time frame if you will before is the amplification. And one of the things that jumped out to me was that there's some really clear indications that after the, not the batch review, but the technical review after a final report has been issued with those manipulation of the data showing that there is no Y present. What conclusion should I be drawing from that?

Yvonne "Missy" Woods:

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SAC Cory Latham: And why would you do that?

Yvonne "Missy" Woods:

SAC Cory Latham: Fair to say that it might be, um, a likely explanation might be that you don't want to deal with a defense expert or defense attorney asking any questions about it?

Yvonne "Missy" Woods:

Mm hmm. If there was Y present there? SAC Cory Latham:

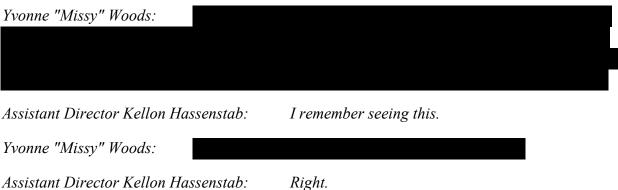
Yvonne "Missy" Woods:

- I asked Woods about deleting data in her case work to not take the additional steps of amplifying data, and she stated
- .

Yvonne "Missy" Woods:		

Yeah.

Assistant Director Kellon Hassenstab:



Assistant Director Kellon Hassenstab:

Yvonne "Missy" Woods:

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Initial	Assistant Director Kello	on Hassenstab	IIA-23-05	February 26, 2024
Assistant Director Kelle	on Hassenstab:	Mm hmm. Sc) —	
Yvonne "Missy" Woods			l	
Assistant Director Kelle Or what is ye	on Hassenstab: our level of confide		feel confident that	t
Yvonne "Missy" Woods	:			
Assistant Director Kelle	on Hassenstab:			
Yvonne "Missy" Woods	:			
• Woods told me				
Woods referred	to			
Woods saidWoods also rem	arked			
 Woods also spec 	cified			
Yvonne "Missy" Woods				
Assistant Director Kelle		Yeah.		
Yvonne "Missy" Woods				
Assistant Director Kelle	on Hassenstab:	Okay.		
Yvonne "Missy" Woods	:			

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Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Mm hmm.
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab: ****.	Is that part of a, can you remind me, I, vaguely
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab: work on those or overtime or something a remembering?	Okay. That's right. And did we get like grants to long those lines or is that something different that I'm
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Okay,
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Yeah.
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Yeah.
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Yeah.
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Yeah.
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Okay. Um, and those,

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Initial	Assistant Director Kelle	on Hassenstab	IIA-23-05	February 26, 2024
Yvonne "Missy" Woods:				
Assistant Director Kello you pissed about it? I n		And did that ov	erwhelm you in	that sense or were
Yvonne "Missy" Woods:				
Assistant Director Kello	on Hassenstab:	Yeah.		
Yvonne "Missy" Woods:				
Assistant Director Kello	on Hassenstab:	Yeah.		
Yvonne "Missy" Woods:				
Assistant Director Kello	on Hassenstab:	Right.		
Yvonne "Missy" Woods:				
Assistant Director Kello	on Hassenstab:	Yeah.		
Yvonne "Missy" Woods:				
Assistant Director Kello	on Hassenstab:	Right. Mm hmi	n.	
Yvonne "Missy" Woods:				
Assistant Director Kello	on Hassenstab:			
Yvonne "Missy" Woods:				
Woods also desc	cribed			
•				
Assistant Director Kello	on Hassenstab:			

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Initial	Assistant Director Kelle	on Hassenstab	IIA-23-05	February 26, 2024
Yvonne "Missy" Woods:				
Assistant Director Kello	n Hassenstab:	Tell me more	e about that.	
Yvonne "Missy" Woods:				
Assistant Director Kello	n Hassenstab:			
Yvonne "Missy" Woods:				
Assistant Director Kello	n Hassenstab:	Is that what y	vou're saying?	
Yvonne "Missy" Woods:				
Assistant Director Kello	n Hassenstab:	Did you –		
Yvonne "Missy" Woods:				
Assistant Director Kello	n Hassenstab:	Okay. Now -		
Yvonne "Missy" Woods:				
Assistant Director Kello	n Hassenstab:			
Yvonne "Missy" Woods:				
Assistant Director Kello	n Hassenstab:	Yeah.		
Yvonne "Missy" Woods:				
Assistant Director Kello	n Hassenstab:	Yeah.		

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Assistant Director Kellon Hassenstab:	
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Okay.
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Yeah.
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Yeah.
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	
Yvonne "Missy" Woods:	
• Woods also said that	
•	
Assistant Director Kellon Hassenstab:	
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Yeah.
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	Okay.

TYPE OF REPORT	INVESTIG	ATING AGENT	CASE NUMBER	DATE
Initial	Assistant Director Kell	lon Hassenstab	IIA-23-05	February 26, 2024
Yvonne "Missy" Woods				
Assistant Director Kello		Okan		
Assistant Director Kette	on massensiao.	Okay.		
Yvonne "Missy" Woods	:			
Assistant Director Kelle	on Hassenstab:	Okay.		_
Yvonne "Missy" Woods	:			
Assistant Director Kelle	on Hassenstab:	Mm hmm.		
Yvonne "Missy" Woods	:			
Assistant Director Kelle	on Hassenstab:	Okay.		
Yvonne "Missy" Woods	:			
Assistant Director Kelle	on Hassenstab:	Right.		
Yvonne "Missy" Woods	:			
Assistant Director Kelle	on Hassenstab:	Yep.		
Yvonne "Missy" Woods	:			
Assistant Director Kelle	on Hassenstab:	Yeah.		
Yvonne "Missy" Woods	:			
Assistant Director Kelle	on Hassenstab:			
Yvonne "Missy" Woods				
• As the interview	v concluded, I foll	owed up on the r	eagent blank tampe	ering question:
Assistant Director Kelle	on Hassenstab:			
Yvonne "Missy" Woods	:			

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Assistant Director Kellon Hassenstab: remember?

Okay, what would you, what would you possibly

Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	
Yvonne "Missy" Woods:	
Assistant Director Kellon Hassenstab:	
Yvonne "Missy" Woods:	

For full details of the information provided in the documents, please review the aforementioned exhibit.

Extension of IIA-23-05 Authorized by Director Schaefer

On Monday, November 13, 2023, I contacted Director Schaefer requesting an extension in completing this investigation, due to the undetermined time frame for the forensic services examination/audit of Woods's past casework. Director Schaefer accepted a 90-day extension for re-assessment if the investigation can be completed at that time (February 11, 2024).

This document is entered in the case file as Exhibit IIA-23-05-Q.

Research Participation Restrictions on Witnesses:

On Monday, November 20, 2023, Director Schaefer authored an e-mail regarding individuals within Forensic Services who would no longer be able to participate in the internal laboratory

This decision was made based on legal advice from CBI's advisors at the Colorado Attorney General's Office in order to separate individuals who may have been witnesses to the events under investigation from the investigative team.

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Interview of (Forensic Services):

The interview began on Monday, November 27, 2023, at approximately 9:00 AM, via videoconference. While speaking with **Sector** I explained and she later electronically signed Form OPS-2, *Truthfulness and Confidentiality Agreement*, and returned it to me via e-mail. The form was later printed, signed by me, and added to the investigation file. KBI SAC Latham was present virtually as well, and participated in this interview.

Throughout the course of the interview, **Sector** stated she retained documentation regarding the incident that led to the 2018 QIR with Woods. She later provided this documentation to me in an email, and I incorporated it into this case file as **Exhibit IIA-23-05-S**.

The interview was audio-recorded and ended at approximately 9:50 AM; the following is a summary of statement, which may utilize paraphrasing:

- stated she had never seen the 2018 QIR documents, and was surprised to learn the documents she wrote at the time were not contained in that file.
- provided the context that she started as a
 . She was hired by CBI as an employee
 Prior to CBI employment, Champlin worked at
- said she caught Woods amplifying one sample on a thermocycler (also known as thermal cycler) earlier in tenure at CBI. Said this is not allowed (in DNA analysis) because it doesn't provide for a positive and negative control.
- said she didn't know the year, but this incident occurred on a weekend when was relatively new. Source said the thermocycler was on, but hadn't been started. Source said she took a picture of the situation with her cell phone and sent it to Woods to ask what was happening. Woods asked source why source opened the thermocycler, and source told Woods that Woods didn't start it (the instrument's process).
- said she later talked to Woods and told Woods she couldn't use the sample without the positive and negative control. said Woods told her

said she later talked to

), and possibly showed her the picture of it. said Woods

• said she felt like Woods was always rushing and cutting corners after this incident.

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then began speaking about the 2018 incident, which she described as occurring on a Friday (July 20). said she wasn't doing case work as a result, and was doing technical reviews. said Woods asked her to review Woods' batch notes. said she was in the lab late in the afternoon, and was also present. recalled that the batch in question was a CODIS confirmation for the Alex Ewing cold case homicide. said Woods wanted it done. speculated Woods wanted to call the agency and confirm the match. said she was given the review around 2:30 pm, and Woods wanted the results by the end of the day. said in her review, she saw two different quantitations (which used to be a requirement, but no longer is). recalled she saw what looked like contamination, and described what additional steps would have been required. said Woods requanted the sample to show it was clean, and that's when noticed the deletion of the values, because nothing was in the CT value. said she asked to come to her cubicle to verify her finding the values were deleted, and said did. said she went to the 7500 DNA instrument and extracted the raw data to verify the deleted data by Woods. said she was angry at being put in this situation by Woods. said she is one of the better technical reviewers, as she was trained somewhere else (a different agency) and looks at numerous points during technical review in the interest of being thorough. said she went to Woods and told her she (couldn't sign off on the batch notes, you know what you did and it's not okay, and was going home. said she told Woods she knew what she did, and she can't cut corners. said Woods and replied that she needs to go back and amp her blanks. said she again told Woods she can't cut corners, and Woods told her Later in the interview, SAC Latham confirmed this person was an Adams County MOU partner and DNA Scientist at the time, and had not seen this in her work. said Woods crying on the way home (on Friday evening). said she called said on Monday morning, she spoke with and She said her supervisor, said she told , was out that day. and the above-mentioned information. said that conversation included how

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to extract raw data from the instrument, the statements Woods had made, and how

to extract raw data from the instrument, the statements woods had made, and how
detected the problem.
• said Woods came to her desk, not knowing spoke with and
and told her said she was in a
holding pattern, but thought and spoke with Woods either the same day or
the next day. I followed up with on January 24, 2024, to clarify what
meant by being in a holding pattern, and she let me know, "I was waiting for
further instruction from management before I continued the technical review of her batch
notes. I did not know whether any of the data from her batch was going to be usable
because of my observation. I was waiting for management to tell me what to do."
explained what was wrong with the situation to Woods and all of the implications of
Woods' actions. noted Woods told her
• also later spoke with about what happened, because was upset
she thought Woods might/would be fired and didn't want to ruin her life.
she told that Woods should never touch evidence again, but requested her not to be
fired. described the situation as awful.
• said she is pissed off because she went to and told her
exactly what she could do to fix this problem, which was to export the results from the
7500 directly in PDF format, to ensure it is available for comparison with the excel file
(that DNA scientist work with). said chose not to implement
this into the DOM (Discipline Operating Manual).
• said she spoke with at the time)
about the matter. said this was sometime in the next week after the incident,
but she didn't have/recall the full details. said she was asked to keep the matter
confidential while meeting with and and . I followed up later with
and she stated she could not recall if either or or both asked
her to keep confidentiality in this matter.
• said she couldn't remember if she was told to write a narrative about what
occurred or if she decided to on her own. She later said it was possible and
asked her to do that. She said she thought she gave her narrative to
in paper form. Later told me she sent the supporting
documentation (by e-mail). said said should have known how to
salu silu silu inversion (by c-man).

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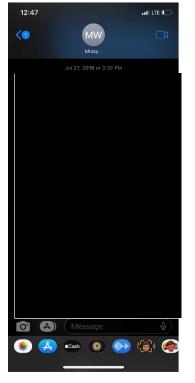
•	extract the data from the instrument based on her role
•	Upon returning to work a spoke to spoke to about what the outcome was of this situation. Said told her she looked at the batches and didn't find anything further. Said there was no further resolution.
•	said she also spoke with a year or two ago and told her that it was too bad Woods has no integrity because she has plenty of experience. a said b told her the reason Woods wasn't fired was because they (CBI) couldn't prove what happened. b said that was the only other feedback she's received.
•	I asked about the content of the memo. I specifically asked about the portion in which writes came back to her office at 3:15 and said Woods (Sector 1). Sector 1). Sector 10 and
•	I further clarified with regarding the statements in the memo about Woods , and said that was not what happened. said Woods was said she didn't remember Woods' comment said she didn't remember Woods'
•	I asked how often she has re-exported data for a technical review. said this was the only time she'd ever done it, and it was based on her suspicions of Woods.
•	Near the end of the interview I asked for a solution overall impressions of Woods as a scientist, since she had described Woods as shady. A said that Woods was working all of the time, and said she later heard of an incident from a swell (described fully below in this report in the said woods generally was rushing around in the office. Stated stated stated stated may have some information regarding a fingernail incident involving Woods (described fully below in this report in

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- the interview section). She wasn't aware of anyone else other than or who may have first-hand information regarding problems with Woods' work.
- After the incident, **s**aid she never reviewed Woods batch notes again, although she reviewed her cases.

On January 18, 2024, **Constant of** re-contacted me. She told me that during the course of searching for materials related to Woods regarding the instructions received from the Attorney General's office, she found a text message interaction regarding the 2018 incident on her personal phone.

The contact is listed as Missy and "MW" and the following is the depiction of the image:



also sent me the text messages that occurred before and after the shown message, which I included in the case file **Exhibit IIA-23-05-S**.

Receipt of Entirety of Woods QIR Documents

On Wednesday, November 29, 2023, I received a shared Google folder containing all of Woods' past QIRs and CARs (corrective action reports) from

. I downloaded these files and incorporated them into the investigation as Exhibit

IIA-23-05-T.

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On Friday, December 22, 2023, I read the 42 QIRs contained in this file in their entirety. It should be noted that all of these QIRs involved Woods, but she was not the direct employee named in all of these QIRs. From a non-scientific background, it did not appear to be that any of these QIRs, other than the 2018 data deletion QIR, is directly related to this investigation. Additionally, it should be noted that the vast majority of these QIRs were resolved in a 3 to 6 month time period, with no other QIR extending to over 2 years that the 2018 data deletion QIR did.

The time period of the 42 QIRs covered from November 6, 2014, (initiation date) to the initiation of the QIR in this incident.

Interview of (Forensic Services):

The interview began on Friday, December 1, 2023, at approximately 9:00 AM, via videoconference. While speaking with **Sector** I explained and she later electronically signed Form OPS-2, *Truthfulness and Confidentiality Agreement,* and returned it to me via e-mail. The form was later printed, signed by me, and added to the investigation file. KBI SAC Latham was present virtually as well, and participated in the initial interview but not the five-minute follow-up conversation that occurred later in the day.

Throughout the course of the interview, **but we stated** she retained documentation regarding meeting with **but we share and but we stated** in 2016 about **but we share and but we share and and the DNA process at CBI Forensic Services. She later provided this documentation to me in an email, and I incorporated it into this case file as Exhibit IIA-23-05-U.** In a review of this document, it appears that **but we share and procedure**. This document does contain a note that an analyst amped one sample in a thermocycler but doesn't refer directly to Woods. It also does not recommend exporting data directly from the instrument.

The interview was audio-recorded and ended at approximately 9:40 AM. Afterward, **between** let me know she wanted to have a follow-up conversation, which we had for approximately five minutes at 2:00 pm; the following is a summary of **between** initial statement, which may utilize paraphrasing:

- **Sector** started with CBI**RECON**, and finished her training **Sector**. Dahlberg said the technical review process in 2014 is different from what it is now. **Sector** said the process in 2014 involved the technical reviewer reviewing the batch file along with all the cases associated with it.
 - said she was a technical reviewer for a batch in March 2014 (involving

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Woods), and was reviewing quant. results and the CT (cycle threshold) columns. During this, she saw there was a CT value but no quantity noted (she later said the field was empty on the spreadsheet). So a said the software necessitates if there is a CT value, there has to be a quant. value. Said she felt at the time this was on purpose, but allowed it was possible to accidentally highlight a value and delete it without knowing.

- said at the time, she looked at 6 to 12 months of batches (on the P: network drive), and not after the batches were uploaded to FA (forensic advantage). said she didn't notice any additional deletions when she did this.
- said she spoke with at the time and advised her of the anomaly found during her technical review (CT value but no quantity) and told her observations. said the outcome was that she told Woods to fix the data, and amplify the sample. said she doesn't recall exactly what she or said during this conversation. later said she recalled Woods being stoic (no reaction) when told about the problem, and that she didn't seem surprised. said the sample was a female reference sample, with a low male quant. (which would have been required to amplify at the time). said her assumption was that Woods deleted the value to not have to amplify it.
- **Sector** said **Sector** was the only person she told about what occurred at the time. It should be noted that **Sector** later provided her 2015 Planning Narrative, which shows on the bottom of page one that **Sector** was asked to improve her communication on these concerns directly to the DNA technical leader (TL) since the issues she raised are the responsibility of the DNA TL as well as her chain of command." The issues that precede this statement are "perceived as analytical errors missed in TRV (technical review)."
- During the review (data mining project) of Woods cases in 2023, went back and found this instance in Forensic Advantage to corroborate her account.
- said she thought QIRs began late in 2013, and may not have established how they were used in 2014. said she can't recall why a QIR wasn't done.
- SAC Latham asked **Sector** if the 2014 incident should have required any additional notifications at the time. **Sector** said she's not even sure if it would require a QIR today, if it was accidental. **Sector** mentioned she has at times selected incorrect information from a drop down menu, which is caught during review, and is accidental.
- In 2018, said she was in the lab with on a Friday afternoon.
 said it was known she was good at DNA, and came to her to ask if

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would review a case and tell her if she was seeing what was seeing. said she went to workspace and she saw the issue with a reagent blank with deleted quant. data.

- Solution said she wasn't sure if she previously told with about the 2014 instance, or told her when this occurred in 2018. If the said she told with at the very latest when when showed her this data. If the said she told with you are seeing, and Woods has done this before. If the said she told with a said she told with a
- couldn't recall if she told what to do at the time.

• said she has never been interviewed about Woods' work or these two incidents. She said **work** told someone that **work** confirmed what she was seeing, but no one ever asked her about it.

In 2018, after the incident, says she told and about the 2014 and 2018 incidents. said told her about the fingernail clipping incident referenced later in this report (in the

section), but doesn't remember when told her about it. discussed what she recalled told her. SAC Latham later asked if she knows what case this was, and told her.

- said said also told her at an unknown point about a single amp tube in a thermocycler (that Woods was utilizing). Explained for analysis there always needs to be at least three samples in a thermocycler at a time.
- and I began speaking about what was found in 2023. said said contacted her in a similar fashion to how did in 2018. said said saked to confirm she was seeing what she thought she was.

• said specifically showed a CT value with no quant. value and said she immediately responded that she (Woods) has done this before. said it was the third time she has seen this anomaly. Said the batch showed her was from 2017.

• Said she pulled into a room and told her about 2014, 2018, the fingernails, and the single amp tube incidents. Said she didn't want this to go by again, and sis said she didn't want this to go by and has some "officialness" in that role. If thought she with about what happened.

• A week or two after this, said current asked her

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to find the 2014 batch notes. said it took her some time because she wasn't certain of the year, and eventually found what she was looking for. said during this process, she found a few more anomalies while looking for the batch notes that she notified the data mining team of.

- As a result, was added to the data mining team until Director Schaefer • separated the witnesses from that team.
- what she referred to earlier about I then asked spoke about January of 2016, and described a meeting she had with and said she wrote up a list of concerns about the DNA program, and procedures she thought could be implemented to make the program better. The single amp tube incident is included in this said she wasn't sure if the 2014 incident was a true mistake, and document. that's why she didn't include it in this document. As noted above, this document was later received from and attached to this investigation.
- said overall (in 2016) she was asking for more robust technical reviews/procedures, including a review of quant. data. said the conversation was 45 minutes to an hour, and her suggestions were not well-received. Ultimately, more,
 - said she was told to talk to
- to CBI. She said in said she came from they had software that looked at quant. data (unmodified/raw) during the tech review (not in an excel file/not editable). She said she was shocked at CBI's practices when she started.
- I asked if had any knowledge of other misconduct involving Woods, and also asked her opinion of Woods as a scientist. said she thought Woods was a manipulative person, and after 2014 had no respect for her. She said she wanted nothing to do with her personally or professionally.
- of her opinion of I also asked said as (in her opinion) was a "horrible" and "very indecisive." described that the authority of the position is given by the FBI and not the CBI. said the person in this position needs to be confident in their abilities and as overall ineffective in the position. had a terrible described said memory and was "weak-willed" in this role. speculated that if I was to interview she may not remember many of the events depicted in this section. Further, she stated may not have remembered in 2018 that a similar incident occurred with Woods in 2014.

said there were two "friend groups" in the Biology/DNA section in the CBI

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Denver forensic laboratory, she suggested interviews with the friend groups.

contacted me and asked me to meet with her later in the day. We met virtually and spoke for approximately five minutes. During this conversation, which was audio recorded, and the recording later attached to the case file, **but to** told me the following:

- brought up the 2014 QIR process. She wanted to clarify that the DNA technical leader position changed from a Criminal Investigator II position to a Criminal Investigator III position. She thought that in 2014 would have been a Criminal Investigator II.
- said she also wanted to add that Woods was dominant and intimidating (as a person).
 said she wasn't afraid of Woods, but didn't want to get on Woods' bad side.
 said she thought Woods had management's ear and wanted to stay on Woods' good side.
 said she was truly scared of being fired, and hated her in 2016

re-contacted me on January 12, 2024, and told me in the process of searching her files regarding the litigation hold, she determined her 2015-2016 Performance Management Plan (PMP) also documented some of the issues discussed during our interview. In particular, the PMP documents **Constant of the issues with the DNA section and technical review process, and details the direction given Constant of the exhibit containing Constant of the notations, Exhibit IIA-23-05-U.**

Interview of (Forensic Services):

The interview began on Friday, December 1, 2023, at approximately 10:00 AM, via videoconference. While speaking with **Sector** I explained and she later electronically signed Form OPS-2, *Truthfulness and Confidentiality Agreement*, and returned it to me via e-mail. The form was later printed, signed by me, and added to the investigation file. KBI SAC Latham was present virtually as well, and participated in this interview.

The interview was audio-recorded and ended at approximately 10:50 AM; the following is a summary of statement, which may utilize paraphrasing:

- is a in the CBI Arvada forensic services laboratory.
- I asked **to** explain the relationship between the Agent in Charge and the technical leader in a forensic science discipline at CBI. **Solution** said she has not worked case work at

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CBI in her years of experience.

said she participates in hiring processes/promotions, does time cards, and day-today activities with her scientists, while the science part is done by the technical leader.

- •
- I asked **1** if she was aware of anything she was concerned about regarding Woods prior to the 2018 QIR. She said she could not recall anything with Woods' case work, but there were incidents with Woods' personality (Woods told another manager at one point to "F off") that **1** dealt with. **1** said she did not recall any case work issues with Woods prior to 2018.
- I also asked **w** to describe Woods' general reputation as a scientist at CBI. **w** said her opinion was that Woods was highly regarded and respected. **w** said Woods was knowledgeable and had expertise in cold case DNA.
- said she re-reviewed her notes from the 2018 QIR incident, prior to my conversation with her. I verified it was the document I had, by its title.
- I asked if she remembered when she wrote that document. She said she thought it was pretty soon after the incident, and she said the date modified on her computer was July 26, 2018. Said she assumed she gave a copy to

at the time. at the time said that was the only thing she recalled she was asked to do at the time.

- didn't recall who took Woods off case work, but assumed it was said she was not a part of any review of Woods' case work at the time.
- I asked why it took 2 and a half years from the time the QIR was initiated to be finalized by management, and she didn't know.
- I also asked **a souther conversation with that is documented in the QIR** prior to its closing. **Conversation with that is documented in the QIR** confronted by either **conversation** or **conversation** said she didn't know if **conversation** spoke to Woods before she did at the time. **conversation** said multiple people spoke with Woods at the time to see if Woods' story matched.
- Then said because this was a technical issue (in 2018), she believed it was out of her hands, and the quality incident review was done by the quality team. Said she was under the impression the said or set of were doing a review of Woods' case work (and hadn't found anything else wrong). Said she did not follow-up to find out if this occurred, or she may have but doesn't remember or have any notes.
- said

wasn't consistent or good with completing QIRs in a timely

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	manner. said had a reputation of not finalizing QIRs. said left CBI in 2021 to which led to the discovery by that the QIR wasn't closed out. said that is why she thinks came to her about the
	matter.
•	said she was surprised and the came to her about the open QIR on Woods. said she assumed the QIR was closed. Said she didn't recall other long-standing QIRs that were open that she was asked about after said left.
•	said from the time she wrote the memo, to the time and a re-approached her about the open QIR, she doesn't recall taking any action or hearing any information about what was occurring with the QIR. and didn't recall any conversations with
	management, but did recall comments would make to her about not
	trusting Woods (she later said on two occasions).
•	said , and now have have been her direct supervisors at CBI. Said in 2018 she thought was her direct supervisor. I asked if she had conversations with solution or about Woods in 2018 or what occurred, and she said she didn't remember. I asked about who made the decisions at the time in 2018. Said as far as taking Woods off of case work, the lab's accreditation and CODIS policies would have empowered the technical leader to take Woods off case work. Said she is 95% confident and/or would have taken Woods off case work.
•	said Woods expressed to her at the time being overwhelmed and stressed. said would have been involved, and she thinks would
	have had to approve.
•	I asked who would put Woods back on case work. said it wasn't her
	decision, as it would have been or said she assumed
	didn't find anything else or determined Woods' actions weren't intentional.
	she didn't recall any conversations about what was found in Woods' cases or why she
	was placed back on case work.
•	said no one other than expressed concerns to her about Woods'
	case work. said at the time was concerned and scared, prior to leaving
•	We then specifically discussed the document written by She said she believes she

- We then specifically discussed the document written by She said she believes she was asked by to interview Woods at the time in 2018.
- In general, said the first part of the conversation was getting Woods' side of

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the story about what happened.

said Woods made it sound

- At the time, said Woods was training a new DNA analyst, and was a CODIS administrator.
- I asked the if she was concerned about the incident, and she said she was. Said her thought at the time was that it was odd the values were missing from the quant. data worksheet. Said she was concerned about how it could have happened. I asked if she thought Woods' statement at the time was plausible
- said

her duty/focus was to fact find and take notes.

- I asked for her gut instinct about what happened at the time, and said it was her gut instinct Woods deleted the values intentionally. I asked if she shared her opinion at the time with and said She said she is confident she told but not sure if she told or said she didn't recall if ever expressed to her his opinion.
- said Woods was one of the highest-performing scientists in the system, and Woods would work up to 40 hours of overtime per work period (4 week time frame), consistently.
- I asked about the other QIRs involving Woods. She said they typically come to the for review (to attempt to see patterns among the scientists), and step in if it is an administrative issue.
- said she did not believe Woods was intentionally cutting corners. said she believed the quality review of the 2018 incident occurred and had the outcome of finding Woods did not intentionally delete data in that or other instances.
- said she did not recall ever telling her that in the 2018 incident.
- SAC Latham confirmed at the end of the interview, which had not heard of any other incidents involving Woods that were concerning. The said prior to the last two months, she hadn't. The then described recently hearing about the fingernail incident described by the below in this report. The said she did not have any information the fingernail incident was ever reported to management.

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- SAC Latham asked is if she thought a breakdown had occurred within the laboratory system. Said yes, the system breakdown involved the 2018 incident not being closed in timely manner. Said there was not a lot of follow-up or communication from the said there was not a lot of follow-up or communication , and the time (2018).
- SAC Latham asked why Woods would have been allowed to be the CODIS administrator after she was pulled off of case work (in 2018). Said she didn't know, couldn't have made that decision, and it would have been up to the said she didn't know to decide.

Interview of (Forensic Services):

The interview began on Friday, December 1, 2023, at approximately 11:00 AM, via videoconference. While speaking with **Sector** I explained and she later electronically signed Form OPS-2, *Truthfulness and Confidentiality Agreement*, and returned it to me via e-mail. The form was later printed, signed by me, and added to the investigation file. KBI SAC Latham was present virtually as well, and participated in this interview.

The interview was audio-recorded and ended at approximately 11:35 AM; the following is a summary of statement, which may utilize paraphrasing:

- provided me with an account from an instance (in 2014 or 2015) that caused her to question Woods' integrity. said she went into a screening room in the laboratory and saw some fingernail clippings (she later said a few, 3-5 clippings) on a screening table. She looked to see who used the room before her, and it was Woods. said Woods came in, brushed the fingernail clippings in her hand, and threw them in the biohazard or garbage bin. said Woods said and later described Woods' and on probation, but thought said she was new to CBI Woods was a "golden child" and was thought to be "amazing." also referenced she came to CBI from and noted she had concerns about reputation. worked at the from said she assumed the fingernail clippings were from evidence, based on her experience and the location. I later asked to put a number on her belief and she
- said 99%.
 said she didn't tell anyone right away, because she was getting a feel for the personnel at CBI. said she told people years later (unknown year), including

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and	, and then later on	and	
(all forensic scientists).			

- I asked to explain further about her above comments on She said dating back to her time at the second sec
- said she was never interviewed or talked to laboratory management about the fingernail clipping incident.
- described an incident in which had to open one of Woods' DNA packets, and she found an unlabeled extra tube in the packet. said she asked Woods about it and Woods came to look at it. said Woods appeared to be about to try to throw the tube away, but didn't. said she thinks Woods determined what the tube belonged to. said this incident occurred around 2017/2018. Note: I did review this incident in the QIR files provided. On Wednesday, January 10, 2024, called me and said in a search for materials related to the Attorney General's litigation hold, she found notes she had regarding this situation (QIR 46028) not previously provided - she later sent her notes to me by e-mail which I retained as Exhibit IIA-23-05-Y. I did observe in reading the document provided by and the OIR that the statement about Woods appearing to throw away the tube is uncorroborated by made by either document.
- said she had concerns based on Woods' reputation, and seeing Woods work fast, too fast in **seeing** opinion. **See and a seeing** said Woods was a star analyst, who got accolades for working many cases.
- I also asked **what she's learned from conversations with other employees.** said she has heard of a couple of instances in which Woods deleted reagent blank information, including in 2018. **What we have a state of a couple of state of a stat**
- said she thought Woods was a good analyst, but not the most thorough, before participating in the data mining project. said she now knows Woods altered the (quant) data, and can't understand why Woods would do that.
- SAC Latham asked what other areas is concerned about. said everything Woods has done is called into question.
- noted she found 11 manipulations in a 2017 batch of Woods that she reviewed during the data mining project.
- said she actively avoided doing Woods' technical reviews after the incidents with

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her.

• I asked **a set of** if there were any other scientists at CBI she was concerned about, and she said there weren't any current scientists, but former scientist **a set of** said said also worked fast frequently worked with Woods and did technical reviews for

also worked fast, frequently worked with Woods, and did technical reviews for Woods.

- said CBI has always pushed productivity and gives higher PMP ratings to those who produce higher numbers.
- said was ineffective in her position, and flip-flopped her opinions.
 could influence sometimes in a negative way.
 said forensic services has had quotas, but they depended on who was in charge at

the time. **Solution** said **Solution** pushed productivity numbers/quotas hard during the time he was in charge. She said employees were nervous/scared about being fired for not meeting productivity numbers.

CBI Management Interviews Conducted by SAC Cory Latham:

SAC Cory Latham of the KBI conducted interviews with current CBI management on Monday, December 4, 2023, including at 2:00 pm, at 2:00 pm, at 3:00 pm, and at 4:00 pm.

SAC Latham conducted an interview with 5, 2023, at 9:00 am.

On December 4, 2023, at approximately 3:07 pm, **Sector** sent me an email containing information he stated SAC Latham requested during their interview (notes from a meeting with . I saved and printed this email as **Exhibit IIA-23-05-V**.

In looking at the	notes	provided, they refle	ect that he docum	ented	
told	and	at the time that	(presumed to be)
caught Woods de	eleting data 4 yea	ars ago (2014) but no	thing was done.		

On February 5, 2024, SAC Latham conducted a follow-up interview with

On February 6, 2024, SAC Latham provided me with his written work product, including interview transcriptions related to this investigation, which is included in this case file as **Exhibit IIA-23-05-W**.

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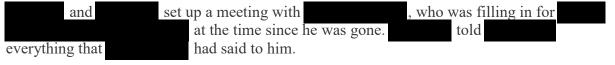
The following are SAC Latham's summaries, incorporated from his written reports (please review the original reports and transcripts for full details):

Interview by Cory Latham

On Monday, December 4, 2023 KANSAS BUREAU OF INVESTIGATION (KBI) Special Agent in Charge (SAC) Cory LATHAM interviewed COLORADO BUREAU OF INVESTIGATION (CBI) . The interview began at approximately 2:00 pm via Google Meet and ended at approximately 2:52 pm (MST). SAC LATHAM audio recorded the interview.

The following are notes from the interview. For more complete detail refer to the attached audio recording and transcript.

has been employed with CBI for approximately years.
In 2018 was a newly assigned as the former of him on July 23, 2018. did not supervise Missy WOODS. The former of him on July 23, 2018. was gone at the time. The final and the went to the former of the office. advised that on the prior friday (July 20th) she completed a batch review on WOODS' DNA work and noticed there was a problem because WOODS hadn't "amped" a reagent blank in which there was a flare (small amount of DNA present). The pulled the data off the instrument (AB7500) and compared it to the batch review spreadsheet. In doing so, she noticed there were cells in the spreadsheet that were blank (those same cells had data on the instrument raw data). The pulled blankly. The said that the discrepancy, and WOODS just looked at the blankly. The said that the discrepancy had caught WOODS doing something similar in 2014, and that WOODS works too much and needs to slow down.



described the CBI QIR process, to include who is responsible for what steps. The QD has ultimate responsibility for the QIR, but the Technical Leader (TL), Supervisor and Lab Director all have roles. They are handled as a team approach.

has seen the 2018 QIR relating to the WOODS issue brought forward by however, he wasn't part of the process at the time other than passing the initial information along to

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In reviewing the 2018 QIR, believes the information provided in the initiation of the QIR was sufficient to notify management of the issue. Managers involved included:

is uncertain who

played what specific roles at that time.

is not sure what root cause was identified for the 2018 WOODS issue. Things that the lab should be considering within that scope: frequency of risk - how often might this issue have occurred and how often might it continue to occur; and severity of issue. PARs or CARs are launched dependent upon those two criteria. If a PAR or CAR is not launched then the root cause field doesn't come up to populate that box within the QIR.

QIRs can turn into PARs or CARs. Currently (2023), the lab is on pace for 500 QIRs, but only has 8 or 9 open CARs. Some have been closed out, and some have carried over from 2022. In general, unofficial root cause analysis is done regularly but only a very small percentage of QI Rs turn into CAR/PARs. That results in no documentation on the QIR of the root cause analysis because that box only populates if the QIR is elevated to a CAR/PAR. is not aware of exactly how for the in 2018, was determining root cause of WOODS' issue. He also is not aware of any steps put into place at that time to prevent the issue from occurring again. Solution believes, based on reading the QIR now, that is because it was believed to be an isolated incident.

One of our accreditation requirements for a CAR is to estimate the time necessary for different steps to occur like root cause analysis and corrective actions. Currently puts a time frame on that. The date is always subject to change, but one is established at the early stages. He then reviews corrective actions frequently (at least monthly) and makes sure that issues are being addressed. QIRs are not necessarily the same - for doesn't put a timeframe on QIRs. Even still, for the reviews QIRs monthly (report generated) and ensures things are moving along. He can pull a report in Qualtrax anytime, or wait for the monthly report. He is not sure in 2018 if there was an auto-generated QIR report.

knows that WOODS was removed from casework for a period of time in 2018. She assisted with a newer analyst's training in the gap between being taken off casework and being put back on. During that time it is understanding that investigation occurred. She went back and looked at a year's worth of reagent blank data. Eventually, WOODS was placed back on casework, and the incident was chalked up to being isolated and due to stress.

theory as to why anomalies weren't found in 2018 review but now are being uncovered may have had to do with the manner in which conducted her investigation. Issues that came up in 2018 were related to reagent blanks, not casework. It is plausible to assume that when was investigating the batches the alterations by

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Missy had not occurred yet.

doesn't think the QIR was "forgotten about". It would have lived within someone's inbox. He is not sure why it took so long, but shouldn't have been forgotten.

thinks was good at what she did. Her shortcomings were that she had difficulty managing multiple complex projects, but she was technically sound. in comparison, is very effective at moving along and managing multiple projects.

doesn't think an internal audit should have caught the 2018 problems. but bases that on his overall knowledge of laboratory audits. Internal audits looks at a minimum of 3 cases per scientist, and those are basically at the technical review level.

believes did report her observations of WOODS to in 2014, but he does not know if reported that further up the chain. Until recently, had no knowledge of catching WOODS running a single sample on the thermocycler.

As **a**, and armed with all the information **because** should have been aware of when the 2018 incident surfaced (single sample issue observed by **because** reagent blank issue reported by **because** in 2018, reagent blank issue reported by **because** in 2014) would have recommended a different path (investigation) if he were in a position at that time to do so. However, he recognizes that decisions are made with information they had at time.

was not aware that had also met with lab management in 2016 to express concerns over how things were being done in biology (to include the technical review process).

has a great deal of respect for as as a second as a second and and wanted to be involved in a lot of things, but not sure what their involvement was in this issue. A second doesn't see anything that stood in way (management wise) of a complete investigation or good decision making.

Interview by Cory Latham

On Monday, December 4, 2023 KANSAS BUREAU OF INVESTIGATION (KBI) Special Agent in Charge (SAC) Cory LATHAM interviewed COLORADO BUREAU OF INVESTIGATION (CBI) . The interview took place via Google Meet, and began at approximately 4:05 MST.

The following are notes of the interview. For more detailed information refer to the attached

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audio recording and transcript.

began employment v	with CBI in	, where she was the	
	. In	she transitioned to the	
over		In 2022,	was
promoted to	over the	, which	is the
position she currently holds.			

was filling in for the position in 2018 when the Missy Woods incident occurred because was gone. It is now about the issue, and that WOODS needed to be taken off casework while the issue was investigated. If and met with WOODS to inform her that she would be removed from casework. WOODS didn't provide an explanation of what occurred to and in that meeting. That was extent of involvement in the 2018 incident.

was not updated on the 2018 issue as it progressed, but on July 12, 2021 she became aware the 2018 QIR for WOODS was still open. was leaving CBI to take employment elsewhere and needed to close the QIR, so she submitted the QIR to take employment elsewhere and needed to close the QIR, so she submitted the QIR to take employment elsewhere and needed to be done, and then document that appropriately. She subsequently gathered information, and put her findings into the QIR. It is not unusual to have QIRs open for a period of time. Generally, that is to allow for a monitoring period. Each QIR is highly variable in nature, and must be handled differently. Therefore no firm timelines were required for QIRs in 2018. That said, three (3) years is unusual. Opinion as to why it took so long to close is that didn't know how to disposition the QIR.

CBI receives over 300 QIRs per year. Lab Management received auto generated reports for open QIRs, and it was not uncommon for there to be over 60 open ones at a time.

The QIR process is different depending upon if the issue is a technical one or not, but in the end all QIR's flow through the Quality Director. Different Manager level responsibilities of a QIR are affected by whether it was initially documented appropriately, if casework was negatively affected, and if outside agencies need to be notified.

Regarding the WOODS' 2018 incident, was initially convinced that adequately looked thoroughly enough into the issue to ensure no other problems existed. Now, looking back, where she needed to, but it seemed to be enough based on the information they had at the time.

is satisfied, looking back now, that the correct root cause of the issue was

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identified, given the information they had at the time. That root cause being stress, was under the impression deletion of data was inadvertent and not widespread.

does not think the incident was preventable with the policies that were in place at the time. She doesn't recall any steps being put in place after the 2018 incident to prevent it from occurring in the future.

Given a 2023 lens, agrees that a PAR should have been implemented. She did not see documentation for either a PAR or CAR.

Until recently, was not aware of the information that brought forward regarding concerns over WOODS' work and her 2014 observations. does not know whether reported to management 2018 recommendation (how to fix the technical review process) or 2014 concerns. would have been then.

believes was a competent and and were peers from 2015 to 2019 and conserved her to be cognizant of issues and thorough in her work. The supervised of from and until she left in the decision to put WOODS back on the bench would have been authorized by and the supervised of the time she was offline. Others likely participated in that decision process as well. WOODS was allowed to continue training scientists during the time she was offline. It is not sure whether WOODS was allowed to continue CODIS duties. CODIS wouldn't involve direct work with samples.

QIR notes indicate was going to monitor WOODS for 6 months after she was put back on the bench. Indicated that monitoring period may have been extended, but since she was uninvolved at that time she is unsure. Indicated the monitoring period during her time as a second or other QI Rs - that is not an unusual practice. Internal audits are conducted regularly (depending on where the lab system is with their external audit cycle). Five (5) cases per examiner are looked at during internal audits. Indicated WOODS could have had some issues with internal audits (not sure), but

she wasn't aware of any significant issues that were ever brought forward. does not think the internal audits should have caught what WOODS did. Audits are not at the level of technical review.

is unsure why WOODS would have manipulated data after the technical review. One possible reason would be in preparation for trial, but that is speculation, doesn't truly know.

was asked a hypothetical question: if she were in

position in 2018 and

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armed with the knowledge of: 1. The single sample on the thermocycler issue, 2.

2014 report of cycle threshold value but no Quant value, and 3. report to management that technical reviews were not sufficient; would she have handled the situation differently. Indicated that armed with that information she would likely have put into place a preventive action to keep that type of thing from occurring again.

Prior to closing the QIR in 2021, she had a discussion with provided with notes of the incident. recalls opining that the WOODS' incident had no indication it was anything other than an unusual one-time thing. only recently relayed to her initial hunch that WOODS' data manipulation was purposeful. also confirmed with that she had not seen any problems (in WOODS' work) since 2018. was not sure what in particular was monitored during the period between 2018 and 2021, just that they hadn't seen or heard any issues.

reviewed the notes/materials in the QIR prior to closing it. She is who attached the notes from and to the QIR.

did not consider the laboratory's handling of the 2018 incident disciplinary. In general, the situation was handled similar to a CAR overall.

previously provided information to Assistant Director Kellon HASSENSTAB. She could not think of any additional, relevant information, other than what she has already provided to Kellon (HASSENSTAB) and during this interview. The interview concluded at approximately 4:42 PM MDT.

e interview concluded at approximatory 1.12 110

Interview by Cory Latham

On December 5, 2023 KANSAS BUREAU OF INVESTIGATION (KBI) Special Agent in Charge (SAC) Cory LATHAM interviewed COLORADO BUREAU OF INVESTIGATION (CBI) . The interview took place via Google Meet, and began at approximately 9:18 MST.

The following are notes from the interview. For further details refer to the attached transcript and audio file.

In 2013, began employment with	the CB	I as the		
He maintained that position until April of	2022 w	hen he was	promoted to	He
also held interim assignments from		until	, when he was the	
, and from	until	wł	nen he was the interim	

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In July 2018 only real involvement in the Missy WOODS situation occurred when called him and indicated they needed to transfer a case to another scientist. She indicated this was because of an issue going on with WOODS. As was made aware of what was going in a general sense during lab administrative meetings, but otherwise he was not directly involved. Indicated that while he had awareness of the issue, it was not at level of detail to assess whether it was being handled properly.

doesn't know why it took so long to close out the QIR. The first he realized the QIR should have been done sooner was 2021 when their **and the source of the**

get things back from

With the information available to lab managers at the time of the 2018 WOODS' incident, doesn't see anything that should have triggered a PAR, but possibly a CAR. Informal portions of the QIR process have elements of a CAR anyway though. There are times where managers complete steps that could be associated with a CAR, but don't formally elevate the QIR to a CAR.

In 2023, has had opportunity to evaluate the QIR issue. confirmed that looked at 2018 batch review data in her investigation of WOODS' work. Because her issue arose in July, there was approximately 7 months' worth of DNA batches. recollection is that WOODS had 18 batches to that point.

doesn't know what here to looked back at investigate, but believes she looked at data Missy had not yet altered. The believes the looked at the common drive where things are stored and did not find any problems. He thinks WOODS had the correct data in that drive, and that she would then copy that data to her desktop, make the changes and then import it into the LIMS system. Part of the reason thinks that is because CBI has now found examples of correct data in one case but deleted data in another case in the same batch. For that to occur WOODS must have kept that data somewhere.

confirmed his understanding of the DNA scientists' process to be: data exported from AB7500 instrument to the P-Drive, then to the scientist's individual folder, then to LIMS.

believes WOODS did that (manipulation on her drive/folder) in order to deceive "us" (CBI) and try to keep it hidden. He thinks that is why missed it in her review. He advised that you don't think someone is going to go to that level of deception. WOODS knew the system and knew how to keep it hidden.

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The Greeley lab is part of CBI's system, but it is "owned" by Weld county. They are doing computer forensics on WOODS' computer in an effort to determine times and dates alterations were made to WOODS' files.

had background knowledge of 2014 observations, Given that opinion that WOODS data manipulation was purposeful and her suggestion to pull raw data off AB7500 and make that available to the Technical Reviewer, questions if did enough to investigate the incident. The question he etc ... has regarding that though is whether even remembered those previous issues and things that were brought to her attention? has a strong memory, but has come to was aware of those prior issues when the realize that not everyone else does. If 2018 incident came up, then she should have done things differently in opinion.

Regarding the above mentioned previous issues, does not know if they were passed up to management. Knowing the culture of the lab system he would be surprised if they weren't. Part of it may have depended upon how brought the and in fact told issues forward though. If that she was aware of WOODS would be surprised if that wasn't passed along to management. deleting data in 2014, has since learned that reported to management her belief that there were issues in DNA section , but when that occurred he did not know about that.

has concerns about whether **and the entire CBI** quality system did enough to follow up and look into the 2018 issue after learning that WOODS told **and the entire CBI** manager that she went back to the AB7500 and re-exported but the missing data was still not there, but then acknowledged that when **and the entire CBI** puts a lot of trust and faith in their Technical Leaders. If they are missing issues it's hard for the rest of management to catch it.

QIRs do not elevate to a CAR that does until it gets to the Quality Director. This QIR never left que for three years. That is part of the issue in get opinion. That paperwork should have been completed before WOODS returned to casework.

doesn't have any perspective as to why 2018 recommendation of supplying the technical reviewer with the AB7500 raw data was not implemented. It appears to now that the root cause and remedy for the issue was been decided rather quickly. It seems that they determined the cause early and steered it that way instead of considering there was a casework issue that needed to be addressed.

It was reasonable to conclude in 2018, based upon the review of the 2018 batch review data,

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that Missy's issue was a one-off, accidental occurrence. However, people in lab management thought it was intentional,

thinks a lot of

The fact that the quality system (technical review) caught the problem before it was released in a report reinforced management's belief that they had the issue under control. Their decision was to remedy it and move forward (with the plan they implemented). didn't have a lot of involvement in the issue at the time, but recalls management discussion to that effect. Not that those opinions were outwardly spoken, but based on the conversations that was the opinion he was left with.

does not know for sure if AB7500 raw data was available for to compare. He knows WOODS didn't delete the data off the instruments, that task was assigned to another scientist and the deletion occurred for data storage purposes.

If had compared the data that was on the	AB7500 to what was in Forensic
Advantage (LIMS) she would have seen difference	es. If had done data comparison
similar to the way the current	does it,
would have found all the issues. went i	nto the individual cases and found the
manipulated data. However, that method of invest	
There were 18 batches at that point in 2018 that W	OODS had conducted. Assuming each
	would have had to look at 180 individual
	understands why did it that way,
but with the way was doing it,	wasn't going to catch it with that method.
believes the ,	, at least, if not
and	, all agreed with the method that
chose to investigate the matter	

chose to investigate the matter.

The quality system does a great job of catching unintentional errors and mistakes. A quality system will never catch the intentional, malicious, deceitful acts of a person who knows the system and chooses to work around it.

The paperwork part of the 2018 incident not being completed until 2021 is a big part of this. notes about her belief that WOODS' data manipulation was That is when intentional were attached. It shouldn't have been done like that.

The interview concluded at approximately 9:59 AM MDT.

Interview by Cory Latham (Initial)

On Monday, December 4, 2023 KANSAS BUREAU OF INVESTIGATION (KBI) Special Agent in Charge (SAC) Cory LATHAM interviewed COLORADO BUREAU OF **INVESTIGATION (CBI)** . The interview began at approximately 3:03 pm via Google Meet and ended at approximately 3:57 pm (MST).

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SAC LATHAM audio recorded the interview. The following are notes from the interview. For more complete detail refer to the attached audio recording and transcript.

In 2018 was lab. Currently, he is the In July 2018 was gone 2 consecu	, and was assigned to the ative weeks for work (
notifying him there was an incident was aware and working on the matter off casework, and he agreed with that decision. homicide and that case was reassigned. He also). While gone, he received a call from with Missy WOODS. . was told WOODS was pulled Also told WOODS was working a high profile
Once back, was briefed by related to work WOODS was doing. about DNA, but did talk to was going on.	that data was missing from a spreadsheet doesn't have a lot of innate knowledge in an effort to understand what
asked questions to understand winderstand	eshoot the issue and understand the
	DDS after returning from being gone WOODS trying to get to the mechanics of how the v she used. WOODS said
and the meeting lasted quite a while. It w WOODS seemed to Th consistent with what she had told the	vas a difficult conversation, and although e information WOODS provided seemed (and).
The CBI laboratory implemented normal protoc WOODS off casework. The year's batch reviews. was of the l caught in tech review based upon the fact that the	was tasked with reviewing that belief that issues such as this should be

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The lab's implemented corrective action plan for WOODS' 2018 incident was based on the belief that the cause of the issue centered around WOODS' . They took her offline and removed overtime. The perceived this as disciplinary because of the overtime. After completing her review, advised that she found nothing further, leaving him to conclude that this was a one-off situation.

In addition to laboratory management, also discussed with the lab management plan of pulling WOODS off casework, disallowing overtime, etc ... concurred with the plan.

described the corrective action plan for WOODS through example. If an examiner does not pass a proficiency test that person is taken off casework. A root cause as to why they didn't pass the proficiency is analyzed (i.e. do they need more training, etc ...). The management team assigns corrective actions, and the examiner completes the assigned actions and re-takes the test. The lab management team would then continue to monitor examiner for anywhere from 3 months to a year, depending on frequency of exams. Hair exams are typically only done on occasion, for example, therefore the monitoring period is lengthy in order to accommodate for enough quantity to review.

has no original notes from this incident. He reviewed the QIR notes in preparation for this interview, and is relying on memory otherwise.

advised that the Lab Manager, Technical Leader, Lab Director and Quality Director may all be involved in a QIR. The Technical Leader is responsible for root cause determination. The Supervisor and Technical Leader are responsible for implementing corrective actions. The Quality Director oversees the process and is responsible for approving implemented actions and plans, or for asking them to do more.

believes the written documentation associated with this QIR was not necessarily thorough enough to sufficiently make management aware of scope and seriousness of issue, but that verbal discussions were. In looking at the QIR, **seriousness** indicated there should have been more inputted into the Evaluation section. That said, he recalls checking with **seriousness** on

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the progress and received verbal confirmation that it was all good, meaning that WOODS had satisfactorily completed what was expected of her.

and didn't discuss specifics about what did to investigate the issue, but he had general awareness, to include that reviewed batch data. And the always been pretty thorough in things asked her for. does not know how it is that she did not find issues in 2018 in her review that are now being found. He is satisfied that a more than a more tha

does not recall any steps being implemented to prevent further occurrence of this issue. He has no recollection of ideas being presented, such as locking that spreadsheet down. A more before seen similar issues anywhere else in the Bureau (other sections or examiners). A does not know about suggestion to fix the problem, and has no recollection of any conversation regarding that.

Not sure why this QIR didn't transition into a CAR, but in general less than 10 percent of QIR'S transition into a PAR or CAR. The Technical Leader is usually responsible for making that occur. In the reviewing this QIR, noticed a pretty significant lag in time before it was addressed and closed out. That said, a consider the course of action on this one to have been consistent with how a CAR would have been handled.

QIRs. DNA gets a lot of them and was counseled by several times on that. She was really good about checking data and ensuring that the necessary work got done pertaining to a QIR, but she often lagged getting the QIR documentation completed. This one lagging doesn't surprise to the monitoring period was also likely longer on this one. Also, the transition from the total to the mean to the transition from the QIR was closed.

Notices for open QIRs go to lab management either once per week or once per month. Open QIRs would be discussed at quarterly meetings held by lab management.

	does not recal	l <u>l a</u> timeline b	<u> </u>	ablished for ste	1 1	
QIR.		and	1	met and agreed	WOODS sho	uld be put back
on the bench.		followed up	to ensur	e that WOODS	5	
	an	d made sure		was comforta	ble that WOO	DS had the
training she w	as assisting a 1	new examine	r with in	a good place.		looked for email
or documentat	tion of that dec	cision making	g process	s but can't locat	e it. However,	, he
recalls those d	letails (lab mai	nagement me	eting and	d his follow up	actions).	

June of 2019 is when	transitioned to	, and
became		

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Internal or external audits could have potentially caught this issue, but not likely in opinion. Only a small sample is looked at during an audit, and often they don't catch this type of thing. In the second seco

was effective in her job, but the did observe that she would sometimes get overwhelmed in her job duties. However, she consistently received "no findings" on audits. Some people would complain about how slow she was on validations and other decisions she had to make, but gave her good reviews based upon the overall performance of the section and the audit findings.

was unaware of any other or prior quality issues in WOODS' work when the 2018 issue surfaced. WOODS generated more QIR's than other examiners, but that is because she worked a lot more cases. The percentages seemed normal.

doesn't recall hearing of the 2014 information (CT value/ no Quant). He also doesn't recall hearing of the single sample issue on the thermocycler that observed. was also unaware of anything specific that brought up about DNA tech review or other processes. He is aware that she did on occasion make suggestions based on her previous time at

thought was part of a committee that did discuss a transfer of the raw instrument data similar to other sections like Toxicology, but for some reason that ended up being a no-go. No recollection of recommending the pdf option (exported from the AB7500 and used to compare during technical review).

recollection of his and discussion was that told him she spoke to WOODS. They compared information WOODS gave them. does not recall any opinion offered by as to whether the data deletion was purposeful.

does not remem	ber the part of the QIR in which	notes indicate WOODS
said		
but when	pulled the raw data the values	were present. In looking at
those notes now	doesn't remember whether	ever mentioned anything
about that, but when he reads i	t now it causes him concern.	-

never saw the memo prepared and provided related to the 2018 incident. Had received that he would have attached it to the QIR. Given benefit of hindsight has questions about whether did her due diligence to investigate this issue.

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Possible reasons for why issues were not found in 2018 by but are being found now may be that only focused on data that was on the network drive, which could have been pre-manipulation before it makes it to the FA system.

is not sure exactly what examined to catch the issue. In that regard, he is not familiar with the specifics of their process. He was operating under the belief it was during the technical review process, and relied on that to feel better that there weren't other issues.

feels that laboratory management handled the 2018 WOODS' incident how they handled other serious issues that occurred in the lab. In the lab. In the seperienced other issues over the years. This issue leaves and the with more questions than anything. He doesn't understand how five (5) more years of case work occurred without WOODS getting caught. It makes and the feel like he didn't do his job in 2018, like he should have pressed it harder.

Interview by Cory Latham (Follow-up)

On Monday, February 5, 2024, KANSAS BUREAU OF INVESTIGATION (KBI) Special Agent in Charge (SAC) Cory LATHAM conducted a follow-up interview with COLORADO BUREAU OF INVESTIGATION (KBI) . The interview took place via Google Meet, and began at approximately 3:02 pm.

The following are notes from the interview. For additional detail refer to the attached transcript and audio recording.

was gone when the 2018 Missy WOODS incident occurred. Upon his return he was verbally briefed, but not provided any written memos or reports to his recollection. He does think provided him with an email. A share the has looked for any notes, memos or reports he may have created regarding the situation, but can not locate any.

doesn't think he saw notes, which were later attached to the QIR in 2018. He has seen them since so it's difficult to remember now when he first saw them, but believes it was after 2021.

reiterated from his first interview that his initial conversation with WOODS was difficult, at best. She was very emotional, and the second se

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believes that because some individuals felt WOODS may have purposely manipulated data that administration discussed that, but appropriately proceeded. He had conversations with **administration** and **administration**. They felt that whether the data manipulation was purposeful or accidental that the underlying reason for it was WOODS' and that even if it was purposeful that it was just "something stupid" she did in the moment (as opposed to a systemic issue).

Notification to asked was primarily done by the She kept him apprised. On one occasion was asked was to update was a she was that. Could tell was a she was a she was providing the update. This would have been after WOODS was taken off-line, and lab administration had made some decisions about what steps the lab was taking prior to bringing her back to case work.

didn't recall any discussion about implementing SOP changes to prevent issues such as this from occurring again. However, he did remember a working group being put together to see about transferring data directly from lab instrumentation (chemistry, toxicology, DNA) into the LIMS Forensic Assurance system. A working group met and discussed, but ultimately decided it was either too labor intensive, or there was some issue with it that made it not very workable.

tried to recall who was on the working group. Following the interview, he sent SAC LATHAM an email and indicated that he located information on that. Specific to the DNA portion of the group, members were: ______, ____ and _____ and _____. The interview concluded at approximately 3:15 pm.

Interview of

(Forensic Services):

During the week of December 4, 2023, South Dakota DCI Agents conducted interviews at CBI's Arvada Forensic Services laboratory. CBI Forensic Services was assigned by CBI Director Schaefer as a liaison. While South Dakota DCI Agents were conducting interviews, informed me that he learned may have information relevant to my internal affairs investigation. As such, I contacted may and arranged for a videoconference interview on Friday, December 8, 2023, at 1:10 PM.

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Prior to speaking with **Confidentiality** I provided him, and he later electronically signed Form OPS-2, *Truthfulness and Confidentiality Agreement*, and returned it to me via e-mail. The form was later printed, signed by me, and added to the investigation file. KBI SAC Latham was present virtually as well, and participated in this interview.

The interview was audio-recorded and ended at approximately 1:30 PM; the following is a summary of statement, which may utilize paraphrasing:

- started at CBI in
 - mentioned he has side duties, including
- has elevated user privileges to make corrections in the LIMS report writing system. Solution said he can correct mistakes or issues with reports, as requested by analysts doing case work. Solution said the requests come in daily through a workflow, and whoever is available (as administrators) will complete the request.
- worked very closely with Woods on CODIS and was friends with her.
- I told **Constant** I wanted to discuss Woods' requests to him for edits or changes within her reports. **Constant** said Woods would often ask him to delete attached items (known as objects) from the lab object repository. **Constant** explained each case has a lab record that includes attached documents and items like DNA packets, scans, etc. in the lab object repository.
- said Woods was resistant to completing the workflow for these requests. He later said she would (Google) chat him directly about these requests, and he would comply in completing her requests for her. **Second** said Woods was his "No. 1 customer" for making edits and changes in her reports.
- said he thought Woods made more mistakes than others because she did more case work than others. Said some of the other committee members would not make corrections for Woods without her completing the workflow, but source would and that's why she went to him (so she didn't have to complete a documented workflow).
- **Sector** said he would ask Woods to complete a workflow and she was resistant and gave him a hard time about it. **Sector** said Woods always described the workflow as a waste of time for her. **Sector** said in retrospect, he wishes he wasn't such a pushover. He described Woods as being intimidating to him.
- I asked **words** to describe the requests from Woods. He said Woods would upload the wrong file to the wrong case at times. He said there were also times when Woods uploaded versions 1, 2, and 3 of her batch notes and asked him to clean up the objects.

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said he never knew what was wrong with the files he was deleting or what changes Woods made when she uploaded new versions of the files.

- said it would be difficult to track Woods' requests because she was resistant to using the workflow. Said the deletion of lab objects are not obviously tracked in FA, but he wasn't sure if the company can recover that information. Said he thought CBI was reaching out to find out if this is possible.
- I asked **a state of** if he was suspicious of Woods' intentions. He said he was not suspicious and did not question her integrity. **State of** said he thought Woods did things he personally wouldn't do, but nothing that was against the DOM (laboratory policy and procedure). **State of** described the way he would process DNA, and the faster way that Woods did that he believed increased the possibility for contamination.
- said he was never concerned about Woods' integrity and had never heard about the 2018 incident until recently.
- I asked **weakened** if in retrospect the amount of edits Woods asked for is suspicious. He said his eyes have been opened and he thinks Woods being resistant to doing workflows, having batch notes in version 3, and similar actions are red flags. **Weakened** said Woods would just give him the case number and request that he delete an object. He said this was done mostly through chat but also through e-mail (mostly CODIS-related).
- said before he was in the role as the the role and could be chatted to request changes. Said he thought and Woods were close.
- said the changes were generally before the initial technical review, but one or two times during technical review.
- SAC Latham asked to compare Woods to other requests for batch notes to be deleted, and recalled one other person asked for it (he later said one instance for said Woods asked him to do it a lot, more than 20 times. He said it was pretty frequent, 1 or 2 times a week.
- said at times Woods would create a wrong item number, and ask him to delete it such as a DNA packet. Said this was probably due to moving too fast, and not sinister.
- said Woods would complain when technical reviewers took a long time, and liked when was her reviewer.

Interview of

(Former CBI Employee):

The interview began on Wednesday, December 13, 2023, at approximately 3:00 PM, via videoconference. It is not a CBI employee, and therefore this was entirely a voluntary

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interview. I did request confidentiality in the matters we discussed. KBI SAC Latham was present virtually as well, and participated in this interview. Please note, confidentiality is also alternatively referred to as by some witnesses in this report.

The interview was audio-recorded and ended at approximately 4:08 PM; the following is a summary of statement, which may utilize paraphrasing:

- said she had not talked to any CBI employees about what was going on with Woods, and only knew what she read in the news.
- said she remembered the 2018 QIR incident, and said it was the only incident she remembers with Woods while she was at CBI.
- started at CBI in , and became the . She left CBI as in
- I asked the if she had concerns about Woods case work or integrity outside of the 2018 QIR. Said she remembered Woods worked lots of overtime and may have worked too fast. Said she didn't have true quality concerns, but did ask Woods to slow down. She said she didn't have integrity concerns with Woods.
- said she didn't specifically remember any scientist bringing concerns about Woods to her prior to 2018.
- I asked what she remembered about the 2018 QIR. as a said found the data that she called "weird" and brought it to her and compared attention.
 confirmed the data was a mismatch between cycle threshold and quant. data and compared the data was a mismatch between cycle threshold and quant. data and compared the data was a mismatch between cycle threshold and quant. data and compared the data was a mismatch between cycle threshold and quant. data and compared the data was a mismatch between cycle threshold and quant.

stated she didn't know if it was a cut and paste error. said no one should be cutting and pasting in that part of the spreadsheet.

- said management, including said she didn't remember much about the conversations except for Woods was stressed and working a lot. Said Woods was upset about it, and was told not to do overtime and to slow down.
- said in her role, she went back and looked at batches produced by Woods, but didn't see this situation occurring in other data.
- I asked what she believed or thought at the time, specifically regarding Woods. She said because she had known Woods for so long, she believed her. Said she questioned how it could occur, but trusted Woods saying

said it was strange, and she had never

seen it before.

• said it is hard to make up data in the DNA analysis process, but it may be easier to

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delete data. said she wasn't sure why Woods would delete data, because contamination is very common and there are methods to deal with it.

- said she trusted management above her to look into this further as well.

was responsible for the overall DNA program. said she was involved with case work and technical issues, at times alongside of their direct supervisor.

- and I then discussed who would have decided to take Woods off and then put her back on case work. So said she didn't remember, but she thought the decision was made in conjunction with a group. So said she thought would probably make the decision, based on so recommendation. So thought so would and possibly was the "forerunner" of the situation.
- I asked what she remembered about the overall perception of Woods regarding the deleted data. So as a said she thought overall the group believed Woods and struggled with why someone would delete data intentionally. I asked so if someone not wanting to amplify male DNA would be a reason, and she agreed it was a potential motive/reason.
- I asked the about what her process consisted of for reviewing Woods' other cases. said she thinks she "really looked at the quant. data" to see a pattern, and to look in cells for them to be blank.
- said it wasn't a huge review, and was a few (3) to 6 months worth of batches. Later, I asked for specifics of this review and said she thought she would have pulled batch notes off of the LIMS system. Said she would have used the batch notes to look at the cases.
- said she did not recall any additional monitoring of quant. data when Woods returned to case work.
- I then asked why the QIR took two and a half years to close out. said she closed out QIRs as she was leaving (CBI) for other employment. said she didn't remember if this QIR progressed to a corrective action or not.
- I shared my screen with **and** to show her selections from the QIR. I showed her the time gap between the initial QIR and close out. **The said all quality issues with DNA came through her, but that didn't necessarily mean she took any action.**
- said she had QIRs open when she left CBI, that she didn't know how to close out. said she had approximately ten QIRs open when she left that were of that status

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(open because she didn't know how to close them out).

- I asked **w** to tell me what should have happened with this QIR. **w** said things might have been done outside of the QIR, but ideally it should have been completed as soon as the investigation was done.
- said QIRs were open to document things, but she wasn't sure how to consider them completed at the time. Said depending on the situation, there were different pieces to put into a QIR. Said this was the only instance she recalls in which a scientist was taken off of case work in this manner.
- said it probably took a few days to a week to review Woods' case work. She later said she probably would have reported to that she completed the review.
- didn't recall being asked to participate in any further management meetings after Woods was brought back to case work.
- said she thought she pulled raw data from the instrument to compare with Woods cases during her review. She clarified that she thinks she would have done this but it is not certain she did actually do it.
- I asked if **focused** on reagent blanks, and she confirmed it was a limited focus on reagent blanks and blanks in general to see that the data looked as it should. She later emphasized a limited scope, and that she wasn't doing a "huge" review. I asked who determined what the scope would be, and she said thought she and would have determined the scope.
- I brought up to the suggestion that DNA analysts should utilize the raw data in their cases, instead of doing editable spreadsheets. Said generally scientists trusted each other's work and had SOPs they followed. Said she wondered if it was an overreaction and was unnecessary work at the time. Said she remembered said she

brought this up to either her or . She didn't know if she brought this suggestion up with management.

- said she recalled no discussion of seeing if other scientists were doing this at the time.
- said she didn't remember any suspicions of Woods tampering with reagent blanks.
- I then brought on to the video conference screen **where** memo that she wrote for the 2018 QIR, so we could discuss it in detail. I again asked **where** if she thought the deletion was intentional at the time, and other than calling it weird, **where** didn't provide any additional information.
- We then looked at and discussed the second paragraph which discussed **weight** review of Woods' work. We discussed that 18 batches was a lot for the year to date at that point, but possible with Woods working overtime. **Weight** said the "run data" was not on the

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instruments anymore and unavailable for her review at that time.

- The note regarding **backet** interview with Woods on 7/23 (2018) was brought to **backet** attention. She reviewed what she wrote but didn't recall anything additional to what was noted. She noted that she took Woods at her word at the time, that the data was inadvertently removed.
- We then looked at the section containing notes about the conversation with at 3:15 pm. Solar said she remembered the conversation occurring with but not the sections indicated by both 1 and 2, which seem to explain telling that Woods

implied later in the interview that she still didn't remember this information being involved, but noted that if it was written in her memo it occurred.

- didn't remember any specific involvement with and in the 2018 QIR. I asked and if she remembered any reports and made to her in the past, and she said she didn't. I followed up later specifically asking if a reported to her missing quant. data in Woods' work, and and said she didn't remember anything.
- I asked **where** if she remembered any reports of Woods throwing away potential fingernail evidence, and she said she didn't, but remembered Woods losing a piece of evidence at one point.
- We then spoke about a report of Woods having one tube in a thermocycler, and said she remembered a positive control missing in that incident.
- I asked more about process for closing out the open QIRs when she left. She said she may have discussed (with process)) her to-do list before leaving, and said when she forwarded the QIRs on, the person receiving them would have received a notification.
- I asked who made the decision on the 2018 QIR from her memory, she said she thought it was at the time.
- SAC Latham asked if the remembered any documentation from the said she thought she was shown documentation from the about the deleted quant.
 said she isn't sure if she ever saw the memo about the matter. Later in the interview, I asked again about this and the said she didn't remember reading memo.
- SAC Latham asked **about** about technical reviews. **Solution** said the technical reviews were moved around in rotation throughout the state. **Solution** said she didn't want any silos, and reviewers from other labs would review Woods' cases. **Solution** said who was doing technical reviews is tracked in LIMS.
- SAC Latham asked if reviewed a large amount of Woods' work. said Woods and had cubicles next to each other, and were both impatient,

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implying that they passed case work to each other as a result. said Woods did a lot of the form (for the form of t

- SAC Latham asked if there was a consideration at the time that Woods' deletion could have been purposeful. Said she was sure that there was. On that note, SAC Latham asked if there is comfortable that the level of review that was done was sufficient and said noted if she could go back, she would have done more. Said said the thought was if Woods' data deletion was caught once, it would be caught again.
- SAC Latham began discussing Woods taking out batch notes from LIMS. didn't remember if Woods had that approval, and SAC Latham asked if she knew who did.
 said was on a subscription of and could make report corrections.

then discussed the workflow for corrections, but also noted scientists could just ask someone to do it. **Sector** said the type of things corrected would be an extra item of evidence, a sub-item in the wrong submission, and an item named wrong are examples. said if something is changed in the worksheets and files, those changes should be

tracked.

- SAC Latham asked **and** if there was any consideration of implementing a PAR (preventative action review) in this case. **Solution** said they weren't used frequently and probably should have been used more.
- continued to say this incident was a "one off" and CBI's rules are well-within normal quality standards for the labs she has worked at. She said she didn't think any lab would have implemented anything extra based on this circumstance.
- SAC Latham asked if the system is set up to catch accidental mistakes and purposeful deletions would be tougher to catch, and agreed.
- I asked **a** if the DNA analysts were picking and choosing who to technically review (gaming the system) and that the system wasn't random. **a** said that was her experience, and reiterated they tried to do a batch rotation situation.
- said Woods was not an easy person to challenge, and they all looked up to her (cognitive bias).
- I asked what it would mean if Woods had a trend of not amplifying male DNA. said that would mean to her Woods was trying to get more cases out the door. I also asked for a first within Woods' expertise she would know whether amplifying male DNA would be a waste of her time, and said she didn't think Woods would go that far based on policy not allowing it.
- SAC Latham asked what the root cause of the 2018 situation was, in her opinion, and said she thought Woods made a big mistake from working too fast and doing

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too much.

• I asked why would Woods have been taken off case work but kept as a CODIS administrator. Said she didn't remember but thought only a couple of people were CODIS trained and could do that work (at the time).

Interview of (Former CBI Employee):

The interview began on Wednesday, December 13, 2023, at approximately 4:10 PM, via videoconference. If is not a CBI employee, and therefore this was entirely a voluntary interview. I did request for a confidentiality in the matters we discussed. KBI SAC Latham was present virtually as well, and participated in this interview.

The interview was audio-recorded and ended at approximately 4:30 PM; the following is a summary of statement, which may utilize paraphrasing:

- said she has no clue what is going on with Woods' situation, and hasn't heard anything. She worked at CBI from **said** to **said** and worked closely with Woods in the DNA unit. **Said** she was friends with Woods.
- said she had no concerns or red flags about Woods' case work. said Woods was a high-producer.
- We then discussed the technical review process. I asked if she and Woods would technically review each other reports. If a said there were four analysts (including Woods and Woods and Woods in the Denver office that were high producers that reviewed each other's work.
- I asked **a set of** if she ever extracted raw data from the 7500 and compared it to the DNA worksheet for a technical review. **Set of** said she did not do that at CBI and not at her current lab. **Set of** said this type of review was not regular or routine in her time at CBI. **Said** she didn't ever remember this being a suggestion.
- confirmed she was on the LIMS committee for FA. She described that the duty consisted of removing attachments from case files, and also training new hires on utilizing LIMS (as well as upgrades). Solutions and she also required an explanation when she was requested to delete an attachment she did not think Woods requested this any more than anyone else.
- said she has been racking her brain about her time at CBI, and can't think of anything suspicious occurring with Woods.

Attempts to Contact		and		:
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Report of Investigation Case Number IIA-23-05 Yvonne "Missy" Woods Forensic Scientist

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On Wednesday, December 20, 2023, I sent **an e-mail to the last known e-mail address** Human Resources had on file for her. I had been unable to locate any contact information for to date, and sent an e-mail to her last known partner, **and the set in the**

On Wednesday, December 27, 2023, I reached **about** on the phone at **about 2018** QIR. We set the interview for Friday, December 29, 2023, at 10:00 AM.

During my interview with and she provided as her last known email address for and and a she last known phone number. I sent an email to that account requesting contact on Friday, December 29, 2023. On Friday, January 5, 2024, (who is now named a she provided and let me know she was going to "respectfully decline" my request for an interview with her.

Follow-up Interview with

The follow-up interview with the began on Wednesday, December 20, 2023, at approximately 3:15 PM, via videoconference. Was previously explained and signed Form OPS-2, *Truthfulness and Confidentiality Agreement,* and returned it to me via e-mail during my first interview with her. KBI SAC Latham was present virtually as well, and participated in this interview.

The interview was audio-recorded and ended at approximately 3:45 PM; the following is a summary of statement, which may utilize paraphrasing:

- I asked about the 2018 QIR, if she knew wrote a memo with data in it at the time. Said she did not remember that from 2018, but heard about it in the last couple of months. If did not know why memo would not have been attached to the QIR.
- We then spoke about if **the second second**
- I asked what details she remembers about her conversation with a second in 2021 that closed out the QIR. Said second reported that with second leaving, QIRs were discovered as not closed, and this was one of them. Said she didn't know if her notes were already attached to the QIR or if she provided them to second at that time.
- said she didn't think it was a lengthy or thorough discussion (with in

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closing out the QIR). She said it was more than 2 minutes, but not an hour.

- I asked a bout the note where a bout met with Woods, and a bout said she didn't remember being a part of that conversation or getting a recap from either a bout or Woods about what occurred during that conversation.
 Woods about what occurred during that conversation.
 Bout a bout the note where a bout a bout a bout the note where a bout a bout a bout the note where a bout a bout a bout a bout the note where a bout a b
- I asked about the verbiage of confirming no additional instances have occurred with Woods' case work. was not aware of any additional monitoring that occurred with Woods' case work.
- I then asked if she recalled any conversations, even if informal, regarding if CBI knew what Woods did was wrong, but just couldn't prove it. Said twice has made similar statements to her, that and didn't trust Woods' case
 - work. said she didn't think expressed any opinion to her about Woods.
- said she thought and and would have reached the decision on what would have looked into at the time in 2018, specifically how far back would have looked and how she reviewed Woods' cases.
- said she thought any future incidents by Woods would be caught by technical review, though she didn't recall any specific conversations about this. Said she didn't recall any conversations about monitoring Woods case work going forward after she was brought back to case work.
- We then spoke about technical reviews in general, and whether it is randomly done or whether analysts select each other. She referenced Woods and another cold case reviewer would typically review each other's work due to the complexity. **Solution** said the queue should typically be worked in order. She said it was possible a reviewer could avoid the work of an analyst if they wanted to.
- We then discussed the LIMS report writing system, and if there are checks and balances for objects to be deleted from reports by analysts. **Solution** said she has not done case work at CBI but she believes the LIMS administrator would delete things as requested by analysts. **Solution** said she does not know if there is oversight in this process, but assumes there is.
- SAC Latham asked **and** to reiterate her role in the 2018 QIR. **Solution** said she was **solution**, and she advised **solution** spoke to her when it occurred. **Solution** said she spoke to Woods on July 26, 2018, to hear directly from her what happened (an interview).
- SAC Latham then asked for the role in closing out the 2018 QIR. Said she talked to solution about it, and was "pretty sure" she provided her notes to solution SAC Latham asked if would be in between sending the QIR for

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review to the I shared my screen with the and looked at the "header" of the QIR that showed the submitted to management the QIR on April 28, 2021, at 2:56 pm after it was previously initiated by the submitted to TL by the state of the QIR on August 22, 2018, at 2:37 pm.

- said that QIR refers to quality incident, and she is not on the quality team, but an . By virtue of QIRs, she has an inbox in this software system, and 95% of the time she reads the quality incident and notes the date and time she read and reviewed it. Said this is for her knowledge to review any trends, such as if an instrument broke down 5 times in a week.
- said the sections that start Week of 7/22/18 and Week of 11/4/18 were added by her on April 30, 2021. The agreed the QIR would have been blank other than the first sentence until April 2021. Said all of this should have been documented in realtime in July 2018, especially once Woods was allowed back on case work.
- agreed that based on the dates, the QIR would have been "playing catch up" to enter the information in.
- said there is no information indicating what did in 2018 in this QIR.
- SAC Latham asked what her expectations would have been regarding this QIR. In noted if something was more administrative, it would be directed at her. She also said if something was blatant, she may talk to someone about what occurred.
- SAC Latham referred to our previous interview with **second** in which feeling was that what Woods did was purposeful. SAC Latham asked expectations as a manager would have been and what her role was. try to get to the root of the problem, which Woods told her

said her gut what her said it was to

make sure she wasn't working overtime. research. then said she reviewed Woods' time sheet to said she did not do any data mining or

• said she was never tasked by anyone to ensure data mining of Woods' case work was sufficient at the time. added she doesn't recall checking in, so she assumed they did not occur.

Interview of

The interview began on Friday, December 29, 2023, at approximately 9:00 AM, via videoconference. It is not a CBI employee, and therefore this was entirely a voluntary

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interview. I did request **confidentiality** in the matters we discussed. KBI SAC Latham was present virtually as well, and participated in this interview.

The interview was audio-recorded and ended at approximately 9:55 AM; the following is a summary of statement, which may utilize paraphrasing:

- worked at CBI and I spoke about the historical chain of command in 2018 for Woods, and confirmed Woods had as an as , , as , as and as the said the 2018 situation was brought to her attention after a technical reviewer over Woods' work, , found an empty cell in the spreadsheet while doing the review. understanding was that went to Woods first with the issue,
- and then to
 said said became involved, and then the matter came to her attention.
 said initially, no one knew what caused the deletion. As a result, Woods was
- said initially, no one knew what caused the deletion. As a result, Woods was removed from case work to attempt to identify the root cause. **Said** said the situation progressed to being categorized as a "mistake." **Said** added that they reviewed historical cases produced by Woods, but couldn't find the same mistake. According to Woods described the situation as a mistake as well.
- said it is devastating for a scientist to be taken off of case work, and under investigation. Said she has encountered this in her career states and added there was a "number" of scientists engaged in problematic work at CBI when she was hired, including "dry labbing." She said she was also versed in this issue due to working at the previous to CBI.
- said the group, and especially couldn't figure out how the cell in the spreadsheet was empty, other than a manual entry/deletion. Said said said said said states interviewed Woods, and stalked to Woods at the end of that interview and Woods was apologetic.
- said revisions to SOPs were also looked at, and she recalled some SOP changes may have also occurred to address this situation.
- said this was thought of as a "one off" as there had never been any (known) past issues with Woods' case work.
- did say she was concerned with the amount of overtime Woods was working when she first met her, because of a situation she dealt with in .
- One note provided was that she wanted Woods to provide training to new

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scientists as Woods appeared so efficient. said Woods would never help with that, though DNA case work was her life.

- I asked **a set of** if the general sense among management in 2018 was that Woods did the data deletion intentionally, and CBI couldn't prove it. **a** said the cell had to become empty by manual entry. **a** discussed the possibility it was accidental, and that it was unusual to change a cell manually. **a** said they couldn't find any proof it was intentional. **a** discussed a past drug chemist in CBI Pueblo who was manipulating data, and how that was uncovered, which couldn't be done in the same way this case.
- thought Woods was on a 100% review after being brought back to case work.
- said it was embarrassing for her that Woods' behavior apparently continued.
- We then discussed if **the event** review process was sufficient at the time. **The event** discussed sampling cases as a practice to attempt to identify intentional malfeasance. **The event** said it was normal to start with reviewing a core group of cases, and to see if red flags were present. **The event** then speculated that **the event** may not have been technically able or proficient to catch Woods. **The event** said nothing was found by **the event**.
- said was a great was a great and did her best. Said said was technically sound, and the requirements for the position came from the FBI, including a Master's degree. The noted there weren't many employees present at the time that met the requirements. Said when she started at CBI, the said was not savvy and eventually went to work at another laboratory (where she is not a
- said CBI was a challenge when she arrived in 2009, with respect to issues and challenges with personnel. said 40% of the staff left within two years, and in that process, said had to go and was next up for the position as took what did to the next level. had a Master's degree. noted the took the program to probably wasn't sufficient to detect what Woods was level left, doing, given the metadata involved. When said CBI hired a "sharp" , as compared to
- I asked about the process of interviewing Woods regarding the 2018 incident, and who all the employees were that interviewed by her. Said normally this process is taken out of the laboratory and handled by and the said normally this given his law.
 - enforcement background.
- I then asked **would** if this situation ever rose to the level of considering firing Woods, to which she noted would involve **would**, and she said it did not.

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- Regarding taking Woods off of case work, said that is her decision ultimately, and only she could make that decision. She said that she may have directed someone else to tell Woods, but it would have been her decision.
 also noted it would have been her decision for Woods to be put back on case work, pursuant to a joint meeting involving findings.
- said Woods' overtime was limited when she was brought back to case work, and noted Woods became stressed at her lack of overtime as it created a financial issue.
- We then spoke about the closing of the QIR, and the fact it was closed out in 2021. I asked **work** if the QIR should have been closed out before Woods was brought to case work. She said the QIR can stay open for a period of time to allow for the monitoring of performance. **Work** stated CBI "probably" kept the QIR open to allow for technical review, but she didn't recall. I asked if this would have involved a plan, and **work** said it would have, and that there should have been documentation.
- said said was a new and and "green" in 2021, and that may have led to a "glitch" in the process and documentation.
- I asked if she was aware of reporting finding Woods deleting data in 2014, and said she had never had any knowledge of that.
- also said she never heard of Woods destroying any evidence.
- I then asked about meeting with and a during the 2018 incident. said it would have been normal for and and a second to meet with employees that had concerns, and to direct action to document in writing what occurred. said they would have talked to action to get some clarity. I asked about that memo not being attached the QIR, and how widely it was distributed.
- We then spoke about and my attempt to contact her for an interview. provided me with her last known contact information for said she thought Woods
- As we closed the interview, said that after she and I originally spoke, she has once again been thinking about how it was possible for Woods to be so efficient in case work (twice as much as the next performing scientist).
- SAC Latham asked what management direction was given in the review in 2018. Said was told to give a deep examination into the situation, and look into the spreadsheets. Then discussed going into the instrument to get the original data, and said she asked was to do that (look at the raw data).

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the process as the "blind leading the blind" with respect to evaluating the metadata. She later said the problem couldn't be re-created.

- said Woods was much smarter than we (meaning CBI forensic services) were at the time.
- SAC Latham then asked what the policy changes occurred and what the process was for that. Said any changes to policy would be documented in Qualtrax, and no old version ever gets deleted. Said discussed the policy distribution process, but didn't have specific recollections of what policy changes resulted from the discussions in 2018.
- SAC Latham asked whose responsibility it was if policy changes didn't get implemented, and she said the technical leader for each section would need to make the policy changes, with oversight by the quality manager (matching).

Submission of Woods' Computer to RMRCFL for Processing

After Woods was confronted by CBI **Constant and Constant and Constant**

With the assumption of the criminal investigation by South Dakota DCI, I spoke on several occasions with Special Agents Bob Palmer and BJ George regarding the computer, and understood they were working with the Jefferson County District Attorney's office regarding the prosecutor's specific desires for processing the computer.

On December 27, 2023, **Construction** forwarded me an e-mail sent by **Construction** to Director Schaefer regarding the computer, requesting it be analyzed by the Rocky Mountain Regional Computer Forensic Lab (RMRCFL). I coordinated with Special Agent Palmer to complete the request for services with RMRCFL, and **Construction** assisted in obtaining a signed South Dakota DCI consent to search form for the computer from Director Schaefer, which I provided to Special Agent Palmer.

Analysis of 2018 Quality Incident Review Policy (QP 11)/DNA 12.3 Report Writing

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During the course of the investigation, SAC Latham obtained several policies in place in CBI Forensic Services during 2018 that may be relevant to this investigation. QP 11 relates to Quality Incident Review, and was issued by **Security** on December 4, 2014 (Revision 2, Document 6959) according to the footer. Additionally, DNA 12.3 Report Writing was issued January 2, 2017, as document 7102, revision 2, also by **Security** Both documents are included in this case file as **Exhibit IIA-23-05-X**.

In reviewing the QP 11 document, I noted it provided the guidelines for the process of Quality Incident Reviews in 2018. Specific to heading *C. Quality Incident Review Process*, I noted the following information of concern regarding the handling of the Woods' QIR related in this document:

- a. In order to determine the proper action to remediate the quality incident, the QIR Workflow must be completed thoroughly in a timely, accurate manner by the appropriate individual(s). These individuals will vary based on the nature of the quality incident. A detailed, specific and factual account of the quality incident must be entered into the QIR Workflow since proper completion of all the next steps are reliant on this information.
- b. Sufficient time must be allocated in order to accurately establish and verify the root cause of the quality incident. The description of the root cause must be specific, rather than verbiage that is vague. This portion of the QIR process will include who is assigned the responsibility to determine the root cause, the steps taken to ascertain the cause and the most likely contributing source(s). The individuals involved in the root cause analysis will fluctuate based on the situation; however, in all cases a qualified analyst, a member of Forensic Services management and the Quality Manager will be involved in this determination.
- c. Once the details of the quality incident are known and a thorough root cause analysis has been conducted, a determination will be made by the Quality Manager and other members Forensic Services management as to the appropriate action to be taken. This may involve no action, preventive action, corrective action or customer notification.
- d. After a determination has been made regarding next steps, it is critical that a timeline is established and followed in order to ensure the timely resolution of the quality incident and the education of the staff and management regarding the incident.

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The policy also establishes the responsibility of forensic services staff, technical leaders, Colorado State and Local CODIS Administrators, the Quality Manager, Forensic Services Management, and the Forensic Services Director in a QIR.

Specific to technical leaders, and relevant to this investigation:

a. The technical leaders (TLs) will serve in a teaching role to the technical staff. As such, the technical leaders must be observant and continually address quality incidents that occur in CBIFS as stated above in forensic services staff responsibilities. Additionally, any observable quality incident that calls into question the accuracy and/or reliability of the test results must cause the technical leader to recommend suspension of the work. The TL must first notify the affected immediate supervisor or designee and the Quality Manager or designee. The initial notification must take place in person or by phone. The technical leader will begin the Quality Incident Review process by initiating a Quality Incident Review Workflow. The technical leader will indicate who was involved, whether the quality incident is related to an individual, section, laboratory or the system and a thorough summary of the incident. The workflow will be submitted to the affected immediate supervisor and Quality Manager.

b. In addition to the above, the DNA technical leader is responsible that all of the requirements of the FBI Quality Assurance Standards are met. This technical leader has the authority to immediately act to suspend the casework in DNA and the sample processing in DNA Database. This TL will immediately notify all necessary management and begin the QIR process as listed above.

Specific to the Quality Manager, and relevant to this investigation:

a. The Quality Manager serves in a teaching/mentoring role to the system-wide staff. As such, the Quality Manager must address any quality incidents which may occur throughout the system.

b. The Quality Manager serves in an advisory role to members of Forensic Services management to ascertain and recommend how best to address a quality incident.

c. The Quality Manager is expected to recognize any quality incident that calls into question the accuracy and/or reliability of the test results. The Quality Manager must immediately suspend the work in question, notify the technical leader, the Laboratory Director and the Forensic Services Director in person or by phone. The Quality

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Manager will begin the QIR process by initiating a QIR Workflow. The Quality Manager will indicate who was involved, whether the quality incident is related to an individual, section, discipline, laboratory or the system and provide a thorough summary of the incident. The workflow will be submitted to the appropriate Laboratory Director and the Forensic Services Director.

d. If the quality incident involves the system, the Quality Manager will be required to complete the remainder of the Quality Incident Review Workflow including a determination of the root cause, the proposed action to be taken and a description of that action. The Quality Manager must forward the QIR to the Forensic Services Director for review.

e. Regardless of who initiates the workflow, if it is determined that the quality incident requires a preventive or corrective action, the Quality Manager will be responsible for ensuring that process is begun and completed in a timely manner.

f. The Quality Manager must ensure that the deadlines stipulated in the Preventive Action Report, Corrective Action Report or Customer Notification are adhered to and that all affected parties know and understand the outcome.

g. In addition to the Forensic Services Director, the Quality Manager is responsible for authorizing the resumption of any work that was stopped.

Specific to Forensic Services Management, and relevant to this investigation:

- a. All members of Forensic Services management are expected to guide and coach the staff. Management is expected to be observant and address any quality incident, regardless of the discipline in which the incident occurred.
- b. The staff member or technical leader who observed or was involved in the Quality Incident will forward the Quality Incident Review Workflow to the affected supervisor to initiate and complete the root cause analysis.

c. All members of Forensic Services management are expected to recognize any quality incident that calls into question the accuracy and/or reliability of the test results. The member of management must temporarily suspend the work in question, notify the technical leader, the Quality Manager, the Laboratory Director and/or the Forensic Services Director in person or by phone and begin the Quality Incident Review process

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by initiating a Quality Incident Review Workflow. The member of management will indicate who was involved, whether the quality incident is related to an individual, section, discipline, laboratory or the system and will provide a thorough summary of the incident. The workflow will be submitted to the appropriate manager, the Quality Manager and the Forensic Services Director.

d. If the quality incident involves a section nonconformity, and the observer is the individual responsible for that section, that supervising manager will complete the QIR workflow in its entirety. They will forward the completed QIR to their immediate supervisor, either a Laboratory Director or the Forensic Services Director and the Quality Manager for review.

e. If the quality incident involves a laboratory nonconformity, and the observer is the Laboratory Director, the Laboratory Director will complete the QIR workflow in its entirety. They will forward the completed QIR to the Forensic Services Director and the Quality Manager for review.

Specific to the Forensic Services Director, and relevant to this investigation:

a. The Forensic Services Director is expected to serve in a teaching/mentoring role for the entire Forensic Services staff and is expected to be observant and address any quality incident which may occur throughout the system.

b. The Forensic Services Director serves in an advisory role to members of Forensic Services management, offering recommendations on how best to address a quality incident.

c. The Forensic Services Director is expected to recognize any quality incident that calls into question the accuracy and/or reliability of the test results. The Forensic Services Director must immediately suspend the work in question, notify the Laboratory Director and the Quality Manager in person or by phone and initiate a Quality Incident Review Workflow. The Forensic Services Director will indicate who was involved, whether the quality incident is related to an individual, section, discipline, laboratory or the system and a thorough summary of the incident. The workflow will be submitted to the Quality Manager and the appropriate Laboratory Director.

d. The Forensic Services Director is responsible for reviewing any quality incident that calls into question the accuracy and/or reliability of the test results.

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e. In addition to the Quality Manager, the Forensic Services Director, or their designee, is responsible for authorizing the resumption of any work that was stopped.

Concerning DNA 12.3 Report Writing, this six page document contained the procedure for amassing the contents of a DNA Case File and DNA Report that was in effect during the QIR in 2018. The document contains the steps involved in technical review of "GMID-X data" and twelve questions that must be answered by the technical reviewers, which includes:

- *A.* Does the chain of custody correctly reflect all items, sub-items, and packets associated with the lab record?
- *B.* Are the case notes complete and thorough enough to be understood by another qualified analyst?
- *C.* Have all objects in the Lab Object Repository been properly identified with the case number, a unique name, and approved?
- D. Have all the appropriate quality control steps of chemicals, reagents, and equipment been performed and documented?
- E. Do the case notes, worksheets, photographs, and other data support the conclusions?
- *F.* Are the conclusions reasonable, clearly stated, and within the range of acceptable opinions of peers within this discipline?
- G. Does the report address each assigned item or its probative element?
- *H. Were the expected results obtained from the positive and negative controls, internal size standards, and allelic ladders?*
- I. Are the DNA types supported by the analyzed data (electropherograms)?
- J. Have the following been verified for each autosomal STR calculation: correct DNA types, values reported properly, PopStats sheets present in case file?
- *K.* Have the following been verified for each CODIS entry: eligibility, correct DNA types, specimen category, Specimen Detail Sheet present in case file?
- L. Have the following been verified for each YSTR statistical calculation: correct DNA types, values reported properly, and database search results present in case file?

LIMS Correction Requests

On Friday, January 5, 2024, I contacted Forensic Services regarding LIMS Correction requests made by Woods. I was unable to locate the document in the information she previously provided. I placed the file received from the previously created **Exhibit IIA-23-05-T**.

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Additionally, I attempted to locate a forensic services policy that prohibits report correction outside of a workflow request (i.e. one requested by chat as described in the **section**) interview section) and was unable to locate a relevant policy that prohibits requests made outside of a workflow.

Outline of Forensic Services Investigative Steps

On Wednesday, January 17, 2024, CBI Forensic Services provided provided me with a memorandum outlining the projects and processes involved in the investigation of the anomalies in Woods' case work. The document is added to the investigative file as **Exhibit IIA-23-05-Z**.

In reviewing this document, I noted the number of known anomalies was documented as 224 between 2008-2023 and 652 cases between 2008-2023. This document provides an outline of the following issues and topics:

- Staff Support
- Quality Case Review
- Quality Case Review Retesting
- Case Information Gathering
- Identification of individuals in Prison
- Search for Subpoenas and Testimony
- Immediate Quality Control Measures Implemented
- Review of Archived Paper Case Files
- Triage calls and questions from agencies and DAs

Interview of

(Forensic Services):

The interview began on Tuesday, January 23, 2024, at approximately 1:30 PM, via videoconference. While speaking with I explained and she later electronically signed Form OPS-2, *Truthfulness and Confidentiality Agreement*, and returned it to me via e-mail. The form was later printed, signed by me, and added to the investigation file.

The interview was audio-recorded and ended at approximately 1:41 PM; the following is a summary of statement, which may utilize paraphrasing:

explained the origin of the research project that was conducted by , which ultimately led to the detection of the anomalies in Woods' case work data. stated the project was initiated to answer a research question raised by a

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Sexual Assault Nurse Examiner regarding swabs conducted during sexual assault kits, and their value in criminal cases.

- said she obtained the data necessary to complete the project through the LIMS vendor, and created the proposal for the intern project. came to CBI in September to start the project.
- said she was made aware of the data anomaly found by through • , and didn't hear anything further until learning about Woods being on (administrative) leave.
- I asked to provide me with the project proposal documents and intern instructions to memorialize within this investigative case file. I received them a short time after the conclusion of our interview and added them as Exhibit IIA-23-05-1.
- followed up with me on Wednesday, January 24, 2024, and let me know she heard • from and determined the reports with the data needed for this project were requested from TCSC/Caliber in late 2020 (possibly November) and received in February 2022.

2018 Forensic Services Organizational Chart:

During the course of the investigation, I obtained a 2018 organizational chart for CBI Forensic Services, provided by , to add context to the relationships and CBI members listed in this report. I added this document to the investigative file as Exhibit IIA-23-05-2.

Follow-up Interview with

The interview began on Tuesday, February 20, 2024, at approximately 10:00 AM, via videoconference. While speaking with I explained and he later electronically signed Form OPS-2, Truthfulness and Confidentiality Agreement, and returned it to me via e-mail. The form was later printed, signed by me, and added to the investigation file.

The interview was audio-recorded and ended at approximately 10:09 AM; the following is a statement, which may utilize paraphrasing: summary of

- , if she indicated to him that it was her belief was asked regarding that Woods' data manipulation was purposeful. said he did not remember. He said he also didn't remember what told him.
- Regarding briefing occasion by him. I asked and he said it was when action to take with Woods.

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said it was limited to one

made the decisions on what

when in the timeline of Woods' QIR this occurred,

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- said he didn't know what whether the knew at the time (in 2018). He said it was a short conversation in which was advised on the courses of corrective action that forensic services had determined. Said this was an approximately 15-minute conversation.
- I asked if data manipulation was brought up during the conversation with former and and and said that he didn't recall that issue being specifically brought up.
- I asked if he thought was receiving a briefing from him as opposed to it being a conversation, and what what knew going into it.
 I asked a structure if he thought was receiving a briefing didn't necessarily know what didn't necessarily know knew going into it.

Interview with

The interview began on Tuesday, February 20, 2024, at approximately 2:00 PM, via videoconference. The interview was audio-recorded and ended at approximately 2:11 PM; the following is a summary of statement, which may utilize paraphrasing:

- had no recollections related to the 2018 QIR, or being briefed about it. I gave him a general overview of the information gained from previous interviews regarding briefings of him by
 and
- said that if he was informed of any allegations similar to what he has heard about in the news (regarding Woods) he would have requested an internal affairs investigation.
 went on to say any report of employee conduct involving untruthfulness or credibility (or similar misconduct) would have resulted in an immediate internal affairs investigation.
- said he did not recall being made aware of any concerns regarding Woods as an employee, and stated he recalled accolades and public recognition given to Woods.
- I asked **would** if he would have any notes regarding any briefings regarding Woods, and **noted** if he received anything in writing it would have remained at CBI upon his retirement.

Nothing further.

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CONCLUSION AND RECOMMENDED FINDINGS

Based on the totality of this investigation, sufficient evidence and facts exist to substantiate the allegation that former CBI member Yvonne "Missy" Woods engaged in conduct that is in violation of CBI's Code of Conduct, in addition to laboratory policy and procedure as specified in the CAR related to this incident.

Because of the voluminous amounts of case work Woods has engaged in at CBI, it is unclear at the time of this report regarding the exact amount of case work that Woods did not appropriately complete and misreported data within, although the known amounts are substantial. It is clear that numerous instances and aspects of Woods' conduct were not done in a manner that would preserve public trust, and has in fact harmed the public's trust in CBI operations.

Additionally, Woods' conduct is very likely to bring CBI in disrepute, reflects discredit upon Woods as a (former) CBI member, and impairs the operation, effectiveness, or efficiency of the CBI as it has and will require additional fiscal expenditures for extensive additional examination and analysis to rectify.

Lastly, Woods was not truthful and complete in all manners associated with her responsibilities as a CBI Forensic Scientist, by her own admissions related to her report writing and accuracy within her written work, as well as what has been found during this investigation and the laboratory quality review.

Based on sufficient evidence and facts, it is recommended that this Internal Affairs Investigation be sustained. Woods' conduct over a period of numerous years would warrant further disciplinary considerations, had she not already retired as a CBI member during the process of this investigation.

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RELEVANT POLICIES

Colorado Bureau of Investigation Code of Conduct Directive

2.2: Authority and Public Trust: Employees shall utilize their authority and power lawfully and appropriately.

2.2.1: Employees shall conduct themselves in a manner to preserve public trust. Employees shall not conduct themselves in a manner that is an abuse or a misuse of the authority conferred upon them.

2.3 Conduct: Employees shall use reasonable judgment and refrain from conduct which reflects unfavorably on the CBI. This includes conduct that:

2.3.1 Brings the CBI into disrepute; or

2.3.2 Reflects discredit upon the individual as an employee of the CBI; or

2.3.3 Impairs the operation, effectiveness, or efficiency of the CBI or its employees.

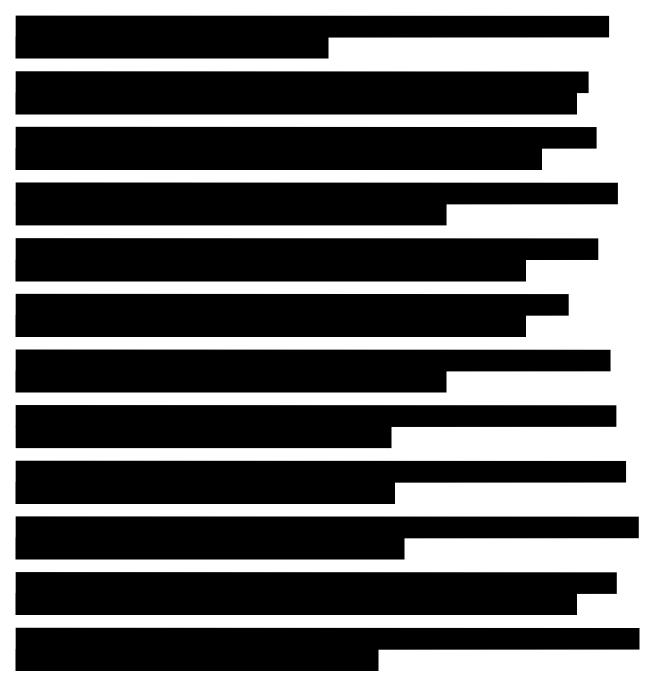
2.8 Truthfulness: Employees shall be truthful and complete in all matters associated with CBI responsibilities.

Note: The impacted CBI's Forensic Services policies and operating standards are covered in the Corrective Action Report (79452) authored by CBI Forensic Services.

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LIST OF WITNESSES (In order of interview/participation)

Kellon Hassenstab. Assistant Director (Internal Affairs Investigator), Investigations. 2797 Justice Dr, Grand Junction, CO 81506. Work Phone: 970-248-7500.



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EXHIBITS AND APPENDIX

Exhibit IIA-23-05-A: A document containing the request from CBI Director Chris Schaefer to initiate the Internal Affairs investigation regarding Yvonne "Missy" Woods, of CBI Forensic Services.

Exhibit IIA-23-05-B: A document containing the Administrative Leave notification from CBI Director Chris Schaefer to Yvonne "Missy" Woods, of CBI Forensic Services.

Exhibit IIA-23-05-C: Two policy documents (saved on October 3, 2023) that include CBI Directive 1.3 (Internal Affairs) and the CBI Code of Conduct.

Exhibit IIA-23-05-D: E-mail correspondence from Attorney Ryan Brackley and a PDF attachment stating Woods' intent to cooperate with the investigation.

Exhibit IIA-23-05-E: OPS-2, Truthfulness and Confidentiality Agreement documents provided during witness interviews with current CBI members.

Exhibit IIA-23-05-F: A thumb drive containing audio recordings from the interviews conducted for this investigation. This thumb drive also contains all files associated with this investigation, including those unsuitable for printing.

Exhibit IIA-23-05-G: Documents related to CBI Forensic Services QIR 38377.

Exhibit IIA-23-05-H: Notes written by **Exhibit IIA-23-05-H:** Notes written by **Formula** following meeting and interviewing Woods on Thursday, September 28, 2023 and Tuesday, October 3, 2023.

Exhibit IIA-23-05-I: The OPS-6 Internal Affairs Investigative Advisement served to Woods by

Exhibit IIA-23-05-J: A document and five printed images referred to during my interview with

Exhibit IIA-21-02-K: E-mail correspondence from Director Schaefer to Attorney Brackley regarding making a credibility disclosure to District Attorneys about Woods.

Exhibit IIA-23-05-L: A document entitled "Confirmation of Resignation and Advisement of Appeal Rights" signed by Woods on November 6, 2023, indicating her retirement.

Exhibit IIA-23-05-M: Internal communication and press release from Director Schaefer regarding Woods.

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Exhibit IIA-23-05-N: An OPS-7 document (Member Confidentiality Agreement) representing KBI SAC Cory Latham's participation as a temporary internal affairs investigator for this investigation.

Exhibit IIA-23-05-O: The request for assistance to South Dakota DCI from Director Schafer for the criminal investigation into Woods.

Exhibit IIA-23-05-P: The Administrative Advisement (OPS-3) document signed by Woods prior to the internal affairs interview, along with the SpeakWrite transcription of the interview.

Exhibit IIA-23-05-Q: A printed copy of the e-mail correspondence between Director Schaefer and I regarding an extension of this investigation to February 11, 2024.

Exhibit IIA-23-05-R: A printed copy of an e-mail from Director Schaefer indicating several participants in the internal investigation would be restricted.

Exhibit IIA-23-05-S: Documentation provided regarding the 2018 quant. deletion she uncovered regarding Woods, including a text message conversation.

Exhibit IIA-23-05-T: A record provided by of Woods past QIRs and LIMS correction requests.

Exhibit IIA-23-05-U: Documentation provided by regarding her 2016 meeting with CBI lab management.

Exhibit IIA-23-05-V: Documentation provided by regarding his 2018 meeting with and regarding what became Forensic Services QIR 38377.

Exhibit IIA-23-05-W: Documentation from KBI SAC Cory Latham regarding his interviews and assistance with this investigation.

Exhibit IIA-23-05-X: QP 11 – Quality Incident Review policy from 2018 (Revision 2, Document 6959) and DNA 12.3 – Report Writing policy from 2017 (Revision 2, Document 7102).

Exhibit IIA-23-05-Y: Documentation provided by on January 10, 2024.

Exhibit IIA-23-05-Z: A document authored by ______, which describes the projects and processes involved in the investigation of the anomalies in Woods' case work.

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Exhibit IIA-23-05-1: Information provided by regarding the research project that led to the detection of the first data anomaly.

Exhibit IIA-23-05-2: A 2018 CBI Forensic Services Organizational Chart.

Appendix Information (provided by CBI Forensic Services, Quality Unit)

- DNA Science
 - DNA Quantification
 - *What is it*: To determine the amount of total human and male DNA present in a sample
 - *Why do we do it*: This allows us to decide what samples to amplify and move forward
 - <u>Thermocycler Instrument</u>: Real-time PCR instrument. PCR: polymerase chain reaction, it is like a molecular copy machine that makes copies of the target regions contained within the quant kit.
 - *What does it do*: Tells us in real-time the amount of DNA present in a sample in relation to a standard curve for three targets: large autosomal, small autosomal, and male. It gives us the ratio of male:female DNA present in a sample, the amount of total DNA present in a sample (how much we have), and gives us information on how we should move the samples forward for amplification which will let us obtain a DNA profile. It can also let us know if a sample may be inhibited or degraded.
 - *How is it properly used*: It is used to determine the amount of total human and male DNA in a sample for amplification decisions. You use these values to make decisions downstream in the DNA process without any alteration of the values.
 - *Data export process:* A .pdf quant report is exported that contains experiment summary, standard curves, results table by well (what sample or RB is in each row/column on the plate), and QC summary for upload into the DNA analysis workbook. An .xls file of the quant results is then exported off of the 7500 real-time PCR instrument for upload into the DNA analysis workbook. This upload occurs by pushing the workflow icon within the DNA analysis workbook and selecting "import 7500 quant results". There is no copying and pasting required.
 - Workflow process for corrections to LIMS reports:
 - Managers and LIMS committee members have administrative access to LIMS, meaning that they can perform tasks that other forensic scientists and technicians cannot. These tasks include; chain of custody fixes, deleting or terminating a lab record, document or photograph. These actions are only warranted if the wrong document or photo is uploaded to a case by mistake or the chain of custody does not accurately reflect the

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movement of an item due to a missed evidence scan. These corrections happen 1-2 times/year per analyst.

- Submitting a LIMS request workflow is like putting in an IT ticket. It notifies the LIMS admin users that an issue needs to be fixed.
- A LIMS workflow is not required to have an admin user fix the issue, but it is highly encouraged. A LIMS workflow typically increases efficiency because you are notifying a whole group of people at once that an issue needs to be fixed, so the first available person can fix it.
- <u>Glossary of Acronyms & Abbreviations:</u>
 - *LIMS Laboratory Information Management System*. Often referred to as FA (Forensic Advantage) which is the specific LIMS that CBI-FS uses.
 - *QIR Quality Incident Review*. Workflow documenting the steps in determining the type of quality incident and the action to be taken, including root cause analysis.
 - Quality incident A form of departure from conformance or potential departure of conformance in the work product.
 - *Ct.* cycle threshold value. The number of replication cycles needed to reach the threshold in which the instrument can detect DNA. This indicates to the analyst the amount of DNA present.
 - *AIC*: Agent-in-Charge, synonymous with Lab Manager or Lab Supervisor in manuals.
 - *CAR Corrective Action Report*. Workflow detailing the course of action taken to address a specific nonconformity and prevent reoccurrence.
 - Corrective action Action taken to address a specific nonconformity and prevent reoccurrence.
 - *PAR Preventive Action Report.* Workflow detailing a course of action to prevent potential nonconformities from occurring and to monitor the effectiveness of the plan.
 - Preventive action Action to eliminate the cause of a potential departure from conformance or other preventable issues.
 - MOU. Memorandum of Understanding
 - *DOM Discipline Operations Manual*. This is a manual which contains procedures for a major area of forensic casework. The procedures are commonly known as SOPs or Standard Operating Procedures throughout many industries.
 - *TL Technical Leader*. A forensic scientist qualified to perform independent casework and assigned system-level quality assurance and quality control responsibilities in the specified forensic discipline or sub-discipline.
 - *LIMS Objects or Object repository or LOR*: An object is a document, photo, pdf or screenshot that is uploaded to the case in LIMS. The Object repository or LOR is the location in the LIMS system that stores these uploaded items.

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Known Error Types in Woods' Case Work, as of February 6, 2024:
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Observation	Outcome	Impact	Issue	# of cases
Reagent blanks (RBs) without a quant value, but 'cycle threshold value' (Ct) is present. Or the opposite, a Ct value is missing but the quant value is present.	RBs can occasionally have a quant/Ct value indicating possible contamination present within the DNA batch. If this occurs procedures outline the proper processes to evaluate the source of contamination thoroughly and to document the occurrence. In these instances no documentation is present showing any troubleshooting into why these values were missing, instead the values appear to be manually deleted.	RBs were run in accordance to the procedure in all but 1 of these batches in spite of deleted data. This could indicate the RBs were tampered with. Batch 17ymw1 was not run per policy, but the policy was changed 2 days later and appears to be as a result of this batch and explains this batch.	1- Data deleted 2- Possible RBs tampering	153
Altered reagent blank quant data. Data present on the instrument is different than what is present in the case-associated DNA batch notes.	Possible contamination was present within the DNA batch which was not evaluated. The value was manipulated by multiple orders of magnitude or to "undetermined". This misrepresented the amount of DNA present in the RBs (also seen via quant calculations).	RBs appear to be tampered with, either with a dilution of the RB or replacement with a new RB. Quant values were deliberately reduced in RB so troubleshooting would not appear to be necessary by a technical reviewer.	1- Deliberate data change 2- Tampered with RBs	443
Requanting of DNA batch data in instances where quant values were present in reagent blanks in the first quant, but are now gone in the second quant.	Possible contamination was present within the DNA batch which was not evaluated. This misrepresented the amount of DNA present in the samples. A second run is permitted, however, it needs to be documented, TL needs to be notified and troubleshooting needs	Entire run was rerun. First data was ignored and not included in cases. RBs in 2nd run show lower to no quant values. RBs appear to be tampered with, either with a dilution or replacement of the sample	1- Deliberately ignored entire run of data and did not record it in case record 2- Tampered with RBs	24

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	to occur prior to			
	continuing on.			
Male quant target				
value is missing when a Male Ct	Samples were all amped appropriately			
value is present	and there was not any			
(which cannot occur) or vice versa	risk to analysis in the cases. It is unknown			
in female reference	why these values are			
samples and in evidence samples	missing as they would not be if one or the			
collected from	other was present per	Cases worked as		
female victims	the manufacturer.	expected	1- Deleted data	4
Male quant target value is missing				
when a Male Ct				
value is present (which cannot				
occur) or vice versa				
in female reference samples and in	Troubleshooting of female references were	Failed to follow		
evidence samples	not performed per the	procedure, procedure		
collected from female victims	guidance in place at the time.	later changed to allow this action.	1- Deleted data	9
Male quant target	Evidence samples			0
value is missing	could have been			
when a Male Ct value is present	analyzed in YSTR if suspect buccals were	Cases were worked as expected, but		
(which cannot	submitted since male	reported inaccurately		
occur) or vice versa in female reference	DNA was present. DNA results were reported	stating no male DNA. Could do more work	1- Deleted data 2- Incorrectly reported No	
samples and in	inaccurately stating no	with suspect buccal	Male DNA, more analysis	
evidence samples collected from	male DNA present when there was an	in the future. Amended report is	could be done with a future submission of suspect	
female victims	uninterpretable amount.	needed.	buccals	8
Male quant target				
value is missing when a Male Ct	Possible contamination in female victim hair			
value is present	control.			
(which cannot occur) or vice versa	Troubleshooting should have been performed,	Case was not worked	1- Deleted data	
in female reference	but was not. Sample	as expected.	2- Additional analysis should	
samples and in evidence samples	had SA and male quant values, so should have	Samples should be amped.	have been performed and was not	2
Surgence samples		umpeu.		2

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collected from female victims	been amped in arson case.			
Entire male quant target row missing (which cannot occur) from evidence samples and male references which includes the both the quant and Ct values	Samples should have been analyzed with YSTR analysis if applicable per case circumstances and if suspect buccals had been submitted.	Cases worked as expected	1- Deleted data 2-more analysis could be done with a future submission of suspect buccals	4
Small/large autosomal target quant values and Ct values missing in evidence samples (either quant values present and no Ct values or vice versa)	Samples were all amped appropriately and there was not any risk to analysis in the cases. It is unknown why these values are missing as they would not be if one or the other was present per the manufacturer.	Cases worked as expected	1- Deleted data	6
Small/large autosomal target quant values and Ct values missing in evidence samples (quant values present and no Ct values)	No DNA profile obtained from item after two extractions which is odd given the quant value. Additional troubleshooting was necessary, but was not performed.		1- Deleted data 2-Additional analysis should have been performed and was not	1
Quant data fields being manually manipulated to different values or	Appears analyst may have added notes regarding M:F ratio to the wrong field of quant data resulting in the quant large autosomal target being "ratio" in one instance. Primarily we are seeing quant values manipulated so that the values appear smaller. Also saw quant values manipulated so the values appeared	Case worked as		
to "undetermined".	higher so that the M:F	expected	1- Altered data	126

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	ratio went higher and samples no longer needed to be amplified.			
Undocumented additional work (additional extractions without documentation)	It appears the analyst went back to items of evidence to repeat extractions without any documentation in the worksheet nor reasoning behind this. In multiple instances the item was consumed without permission or appeared to have another item extracted in its place.	Additional evidence was consumed and is not available for further testing. There is no documentation as to why, and permission to consume was not obtained.	1-Deliberately ignoring data from one extraction/quant/amp/CE and cutting additional sample with no documentation/permission	4
	784=	Total number of cases per issue. Some cases had multipl issues that were found, if a case had two issues it will be marked here as two separate entries.		
	656=	cases had multiple iss	of cases with an identified issue. Some ultiple issues that were found, if a case had will be marked in this total as one entry.	
	227=	Number of independent intentional actions to manipulate, change or delete data.		