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2005 APR 12 ₱ 4: 07

MASON CO, WA. PAT SMARTOS, CO. CLERK

BY MW DEPUTY

SUPERIOR COURT OF WASHINGTON MASON COUNTY

JUVENILE COURT
County Courthouse

4th and Alder Shelton, Washington 98584

Telephone: 360.427.9670

STATE OF WASHINGTON

NO: 0

04-8-00191-4

v.

CASSANDRA RHOADES

MOTION FOR ORDER REQUIRING JUVENILE TO APPEAR AND SHOW CAUSE

DOB: 2-15-1988

(TM)

- 1. The undersigned states that on 02-22-05, the above named juvenile pled guilty to the crime(s) of: Theft 3
- 2. The juvenile was ordered on 02-22-05 to various requirements or conditions under:
 - (X) An Order of Disposition/Restitution.
 - () An Order of Deferred Disposition.
- 3. The juvenile has violated or failed to comply with the requirements or conditions of sentence as set forth in:
 - (X) The attached declaration.
- 4. The undersigned moved the Court for an Order Requiring the Juvenile to Show Cause Why the Juvenile Should Not Be Punished for non-compliance with the conditions of the disposition.

Date: 4/1/05

By: My A3159 Deputy Prosecuting Attorney

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SUPERIOR COURT OF WASHINGTON MASON COUNTY JUVENILE COURT

County Courthouse 4th and Alder Shelton, Washington 98584 Telephone: 360.427.9670

STATE OF WASHINGTON

NO: 04-8-191-4

v.

CASSANDRA RHOADES

DECLARATION OF: TIM VANDERWAAL

A Minor

I. DECLARATION

TIM VANDERWAAL hereby declares as follows: On FEBRUARY 22, 2005 said minor was ordered to 12 months of community supervision.

The minor was ordered to comply with the following conditions:

SHALL REFRAIN FROM USING TOBACCO, NON-PRESCRIBED DRUGS AND 1) ALCOHOL, AND IS SUBJECT TO RANDOM URINALYSIS AS DIRECTED BY PROBATION OFFICER AND SHALL FULLY COOPERATE.

Said minor failed to abide by the following:

PER ATTACHED, URINALYSIS SUBMITTED ON 4-1-05 TESTED POSITIVE 1) FOR THC-MARIJUANA.

I DECLARE UNDER THE PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS A TRUE AND CORRECT STATEMENT.

04-07-2005/Probation, Building 8 DATE/PLACE OF SIGNING



e:(800) 442-0438 FAX (253) 552-1549

Page:

Agency Name

MASON CO. PROBATION

Donor Name

RHOADES, CASSANDRA

Collected

4/ 1/2005 @

Received: Reported 4/ 5/2005 @ 8:00 PM 4/ 7/2005 @ 9:02 AM

Accession:

6944481

Donor Client ID:

Specimen ID: 6944481

Final Report

Test Name

Result

Screening CutOff

GC/MS Quantitations

GC/MS Cutoff

Demographic Data

Collected By

KARON ANTONSEN

Drugs Tested

Amphetamines

NEG

1000 ng/mL

Cocaine Metabolite

NEG

300 ng/mL

Opiates

NEG

300 ng/mL

THC **POSITIVE** 20 ng/mL

THC

42 ng/mL

6 ng/mL

ng THC/mg Creatinine

72

Adulterant Screening Panel

Creatinine

58 4

> 20 mg/dl

Nitrite

ηH

NEG

500 mg/L

7.0

3.0 - 11 0

Certified True and Complete

Donel) Baker, Ph.D.

Daniel J. Baker, Ph.D - Lab Director

(Signed out 4/7/2005)

Pont Date:

4/ 7/2005

9:02 AM