

## **Cuyahoga County Regional Forensic Science Laboratory Evidence Submission Sheet**

CCRFSL Case Number:
Agency Case Number:

This form must be completed for all cases except for those requiring **only** Drug Testing

NEW CASE	ADD'L EVI.	Submission Da	te Submit	Submitting Agency:					Submitting Officer			
Requested Testing: (Note: CCRFSL may refuse any testing considered unsuitable/unacceptable as per CCRFSL Evidence Submission Policies												
<b>List Item Numbers</b> ↓ (Check Appropriate Testing→)		DNA	Finger prints	Drug Chem.	Trace	GSR	Firearm Comparison	NIBIN Entry	Test Firing	Serial # Restor.		
Please sp	ecify your	comparison	requests	(What ite	ms need t	to be com	pared):				<u> </u>	

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