

## EXHIBITS FOR INSTITUTE OF FORENSIC SCIENCE & LEGAL MEDICINE

Division \_\_\_\_\_

Offence \_\_\_\_\_

Station \_\_\_\_\_

Complainant or Dec'd \_\_\_\_\_

I/O \_\_\_\_\_

Susp. or Acc'd \_\_\_\_\_

I/O Contact No. \_\_\_\_\_

Submitting Officer \_\_\_\_\_

Case Register No. \_\_\_\_\_

FL No. \_\_\_\_\_

**(FOR LABORATORY USE ONLY)**

### Brief History of Case

[illegible]

## PARTICULARS OF EXHIBITS

[illegible]

**NOTES FOR LABORATORY USE ONLY**

## PARTICULARS OF EXHIBITS

[illegible]

**FOR LABORATORY USE ONLY**

Remarks: \_\_\_\_\_

Date & Time Received: \_\_\_\_\_  
(DD/MM/YYYY)

Government Analyst: \_\_\_\_\_

Date & Time Returned	Issuing Officer	Receiving Officer	Remarks