

Chain of Custody

State of _____

VS.

Criminal Court No. _____

RECEIVING EVIDENCE

Description of Evidence Received:

Name of Person Receiving / Accepting Evidence: _____
Print Name

Date, Time and Location Evidence was Received:

Date: _____ / _____ / 20____ Time _____ : _____ AM / PM Time Zone _____

Location: _____
Number Street / Rural Route / PO Box / Other

_____ City State Zip

Manner Evidence was Received / Accepted (*in person, FedEx, etc.*):

Evidence Received From:

Name / Signature of Person Completing this Form: _____

Printed Name: _____ Date: _____ / _____ / 20____