



TENNESSEE BUREAU OF INVESTIGATION

Forensic Services Division

Evidence Unit Standard Operating Procedures Manual

Appendix I - Evidence Unit Chain of Custody Form - Single Section

Appendix I – Evidence Unit Chain of Custody Form – Single Section

Evidence Receiving Only

Lab Case # _____

_____ From: _____ To: _____ Date: _____

_____ From: _____ To: _____ Date: _____

Exhibit(s) _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

_____ Transferred to: _____ From: _____ Date: _____

_____ Received from: _____ From: _____ Date: _____

Exhibit(s) _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

_____ Transferred to: _____ From: _____ Date: _____

_____ Received from: _____ From: _____ Date: _____



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Appendix I - Evidence Unit Chain of Custody Form - Single Section

Exhibit(s) _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

Transferred to: _____ From: _____ Date: _____

Received from: _____ From: _____ Date: _____

Exhibit(s) _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

Transferred to: _____ From: _____ Date: _____

Received from: _____ From: _____ Date: _____

Exhibit(s) _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

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From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

From: _____ To: _____ Date: _____

Transferred to: _____ From: _____ Date: _____

Received from: _____ From: _____ Date: _____