

## **CRIME SCENE CHECKLIST**

A major crime scene such as a homicide, police involved shooting or buried body requires a massive amount of information to be gathered during the scene processing. This information must be readily available for you to complete a formal crime scene report after the processing has been completed.

The investigation starts when you arrive at the scene and talk with the first responding patrol officer. You must learn as much as you can about the events that have taken place. Observations of the scene must be recorded as well as lighting, structure types, weather, police and fire units present, victim & suspect information, etc. This checklist should also be used to remind the investigator on seldom used processes or other possibilities while still at the scene.

Information concerning the processes that you performed and the areas that were processed should also be recorded as well as the results. All of this information is necessary for you to write a complete and thorough report back at your office.

The amount of processing required at a major crime scene is too extensive to remember, so a crime scene checklist should be utilized.

The crime scene checklist should include but be not limited to the following:

1. Scene Information
2. Weather Information
3. Fire/Rescue Information
4. Detective Information
5. Victim Information
6. Scene Processes
7. Scene Searches
8. Evidence Lists
9. Photography Log
10. Rough Crime Scene Sketches
11. Body Diagrams
12. Firearm Descriptions
13. Entomology
14. Vehicle Information

The idea of a crime scene checklist is to record the information while at the scene so you can write an accurate report. The checklist will serve little purpose if it is filled out when you get back to the office in a day or two.

The crime scene checklist is also your case file for this scene. There may be times when your case file, containing the rough crime scene sketches, evidence lists and measurements are subpoenaed for deposition or for court. You should be able to produce these documents when ordered.

You might hear an argument from some saying that there is no need for the crime scene detective to be so detailed about the scene description and specifics on work performed. As a crime scene detective you have no other choice but to be specific, this is your job. You must testify from your report and the report is prepared from your notes; the more precise your notes, the more accurate your report. The more accurate your report, the more specific your answers will

be to the questions on the witness stand. Your answers and your demeanor on the stand should depict confidence and knowledge about your profession and the work performed and procedures used at any given scene. The report is a detailed description of the work you performed and it also lists your observations. Never make any conclusions in your report. Your report is what you use to testify from; the more information the better your testimony.

**Remember: If it's not in your report it never happened.**

Arrive at the scene with the proper attitude and determine:

1. What has taken place?
2. Where is the scene?
3. What evidence do I need to document?
4. What evidence do I need to collect?
5. What processes must I perform?
6. What will I need for court?

Responding to each and every crime scene in the same manner will allow you to process each and every crime scene the same way, from start to finish with no shortcuts.

Place the printed checklist into a 3 ring binder or folder for use at all major crime scenes. Tabs are recommended for easy access to the different areas.

Additional copies of the notes page, evidence page and crime scene sketch page should be printed out for extensive crime scenes with numerous items of evidence.

The crime scene checklist should be kept on each major scene vehicle and with all personnel responsible for responding to and processing a major scene.

**For Law Enforcement Purposes Only**

**Permission To Use**

The contents of this checklist may be reproduced by any means necessary and as often as needed by any law enforcement agency, law enforcement officer, forensic specialist or officer of the court as needed in the performance of their required duties.

# CRIME SCENE CHECKLIST

Date: \_\_\_\_\_ Beat #: \_\_\_\_\_ Zone #: \_\_\_\_\_ Sector #: \_\_\_\_\_

Case #: \_\_\_\_\_ Dispatch time: \_\_\_\_\_ Arrival time: \_\_\_\_\_

Address of Primary Crime Scene: \_\_\_\_\_

Address of Secondary Scene: \_\_\_\_\_

Name & ID # of First Responding Officer: \_\_\_\_\_

POE of First Responders? \_\_\_\_\_

Information from First Responder: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Patrol Sergeant Present: \_\_\_\_\_

Rescue Unit #: \_\_\_\_\_ Fire Engine #: \_\_\_\_\_

Items moved by Fire/Rescue Personnel? \_\_\_\_\_

\_\_\_\_\_

Name & ID # of Lead Investigator: \_\_\_\_\_

Additional Officers Present:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

<b>Residence</b>	_____	<b>Business</b>	_____	<b>Vehicle</b>	_____
Street	_____	Jail	_____	Hospital	_____
Aircraft	_____	Boat	_____	Ship	_____
RR Tracks	_____	RR Car	_____	Airfield	_____
River	_____	Lake	_____	Creek	_____
Pond	_____	Woods	_____	Field	_____
Fully	_____	Partially	_____	Surface	_____
Buried	_____	Buried	_____	Skeleton	_____





	Yes	No
Do the shoes of fire/rescue personnel need to be photographed or cast?		
Do the shoes of patrol officers need to be photographed or cast?		
Are crime scene perimeters established?		
Does the perimeter need to be enlarged?		
Is all known evidence protected?		
Is the victim(s) still at scene?		
Is the victim(s) deceased?		
Was victim transported to a hospital prior to your arrival?		

**INTEGRITY OF THE CRIME SCENE**

	Yes	No
Do I need a search warrant or consent to search prior to entering the scene?		
Has a search warrant been obtained?		
Has a consent to search been obtained?		
Has anything been moved or altered prior to your arrival?		
Was a walkthrough conducted inside the scene before processing began?		

If yes, reason for conducting walkthrough prior to processing floor surfaces:

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Items Moved and by Whom? \_\_\_\_\_

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**Reason for being moved**

Perishable Evidence \_\_\_\_\_ Officer Safety \_\_\_\_\_ Threatened by Crowd/Onlookers \_\_\_\_\_

**SECONDARY CRIME SCENE**

**Before you respond to a secondary scene from the primary scene:**

**Has evidence collected at the primary scene been submitted into the property room?**

**Have you changed uniforms?**

**Have you changed footwear?**

**Avoid cross-contamination of the primary and secondary scenes.**



## CRIME SCENE PHOTOGRAPHY

	Yes	No
Overall photographs taken of scene w/o evidence placards		
Medium range photographs taken of the scene w/o evidence placards		
Close up photographs taken of the scene w/o evidence placards		
Overall photographs taken of scene with evidence placards		
Medium range photographs taken of the scene with evidence placards		
Close up photographs taken of the scene with evidence placards		
Photographs from the center of the scene to the perimeters		
Evidence photographed first without a scale		
Evidence photographed with a scale		
Point of Entry		
Point of Exit		
Doors & Windows and condition		
Damage to doors or windows		
Objects as they relate to the scene		
Evidence as it relates to the scene		
Evidence as it relates to other evidence		
“North” arrow		
Front of building, structure, vehicle		
Sides of building, structure, vehicle		
Rear of building, structure, vehicle		
Entrances to rooms		
Views of each room from corners		
Body (from four sides & minimum of two overall)		
Area under the body once removed		
Body as it relates to the scene		
Scene as it relates to the body		
Tire and shoe impressions		
Visible wounds		
Location where body found (if moved/removed prior to arrival)		
Close ups of evidence with evidence markers		
Photographed latent, patent or plastic fingerprints		
Photographs of all involved vehicles		
Photographs of all vehicle tags		
Photographs taken of adjacent buildings and structures		
Photographs taken discretely of the crowd or bystanders		
Photographs taken from locations of witness's		
Were timed exposures / painting with light taken?		
Were bullet trajectories photographed?		
Was blood spatter photographed?		
Was the scene videotaped?		
Are aerial photographs needed?		
Were monopod photographs taken?		

**FIRE SCENE PHOTOGRAPHY**

(Taken in addition to the crime scene photographs)

	<b>Yes</b>	<b>No</b>
Fire while in progress		
Exterior of structure		
Point of entry		
Windows (broken out/in, blocked, locked, unlocked)		
Exit Doors (broken in/out, blocked, locked, unlocked)		
Exits in relation to the location of the victim(s)		
Burglar bars on doors and windows		
Pour or burn patterns		
Point(s) of origin individually		
Point(s) of origin as they relate to other points of origin		
Electric clocks showing possible time of fire		
Flammable containers		
Stove and oven and positions of knobs		
Position of light switches		
Settings on heater/Air conditioner		
Electric meter box		
Circuit breaker box		
Smoke demarcation lines		
Fire damage		
Direction fire damage occurred		
Burglar bars on doors and windows		
Space heaters		
Fireplaces		
Extension cords		
Debris		
Smoke detectors and condition		
Fire related items (cigarettes, matches, lighters, alcohol, drugs, etc.)		

**NOTES**

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**PHOTOGRAPHIC LOG**

Roll #: \_\_\_\_\_ Date taken: \_\_/\_\_/\_\_ Photographer: \_\_\_\_\_  
Digital Camera: \_\_\_\_\_ Film Camera: \_\_\_\_\_ Color: \_\_\_\_\_ B&W: \_\_\_\_\_

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**PHOTOGRAPHIC LOG**

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Digital Camera: \_\_\_\_\_ Film Camera: \_\_\_\_\_ Color: \_\_\_\_\_ B&W: \_\_\_\_\_

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**PHOTOGRAPHIC LOG**

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Digital Camera: \_\_\_\_\_ Film Camera: \_\_\_\_\_ Color: \_\_\_\_\_ B&W: \_\_\_\_\_

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**PHOTOGRAPHIC LOG**

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Digital Camera: \_\_\_\_\_ Film Camera: \_\_\_\_\_ Color: \_\_\_\_\_ B&W: \_\_\_\_\_

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**SUSPECT INFORMATION**

Suspect's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Race: \_\_\_\_\_ Sex: \_\_\_\_\_

Is the suspect in custody? Yes \_\_\_ No \_\_\_

Did the suspect live with the victim? Yes \_\_\_ No \_\_\_

Has the suspect confessed? Yes \_\_\_ No \_\_\_

Are the statements made by the suspect consistent with the observations made at the scene? Yes \_\_\_ No \_\_\_

Were photographs taken of the suspect's clothing and shoes? Yes \_\_\_ No \_\_\_

**Describe Any Injuries Observed on Suspect & Photograph**

**Head** \_\_\_\_\_

\_\_\_\_\_

**Neck** \_\_\_\_\_

\_\_\_\_\_

**Chest** \_\_\_\_\_

\_\_\_\_\_

**Back** \_\_\_\_\_

\_\_\_\_\_

**Arms** \_\_\_\_\_

\_\_\_\_\_

**Hands** \_\_\_\_\_

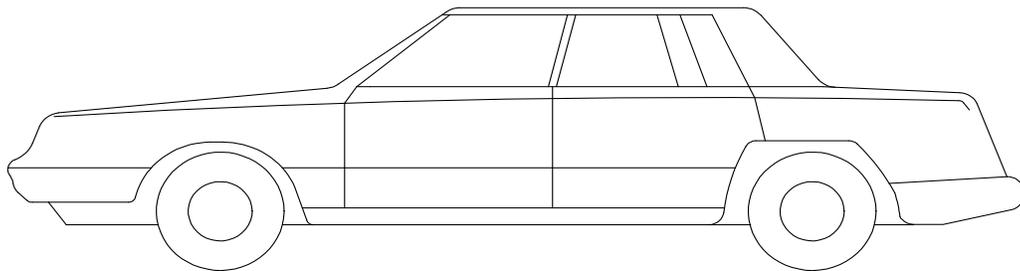
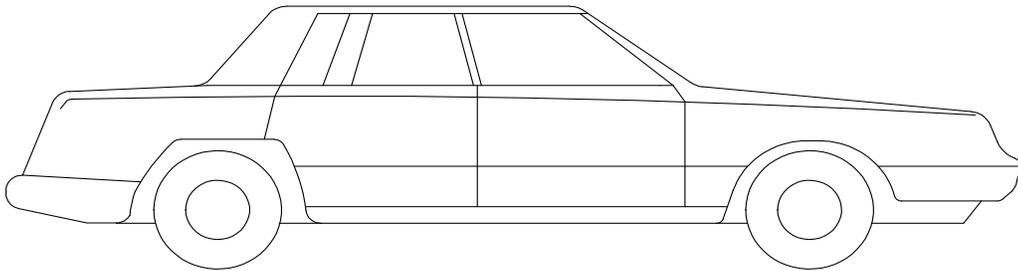
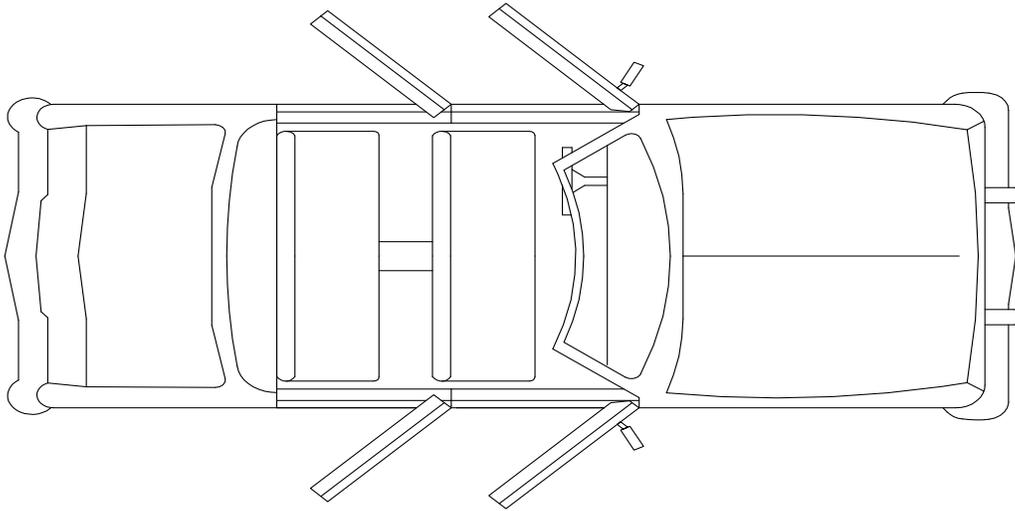
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**Legs** \_\_\_\_\_

\_\_\_\_\_

**Feet** \_\_\_\_\_

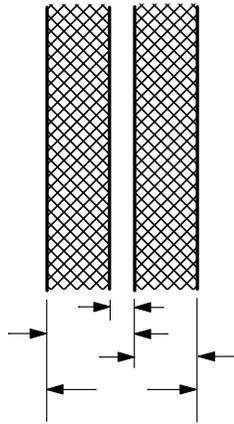
**SUSPECT VEHICLE**



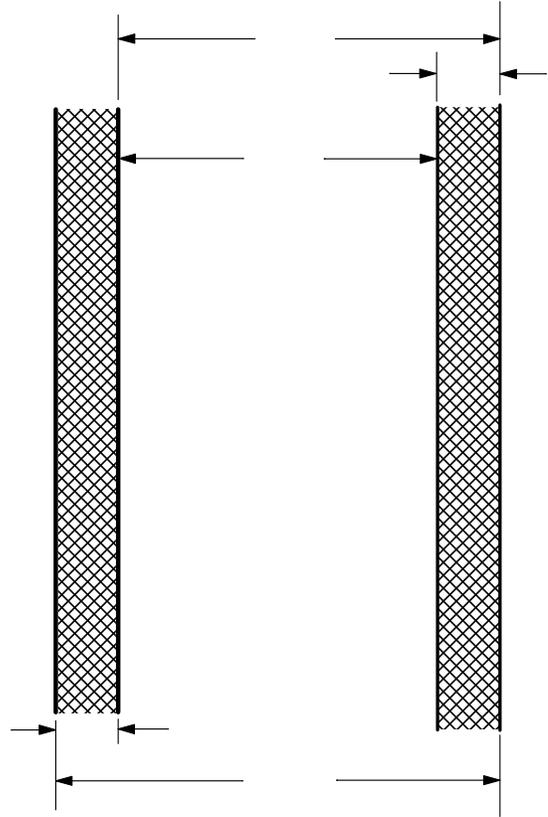
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VIN: \_\_\_\_\_ Color: \_\_\_\_\_ 2DR \_\_\_\_\_ 4DR \_\_\_\_\_

Tire Impressions Located at Scene

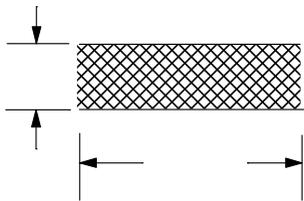
Dual Wheel Tire Impressions



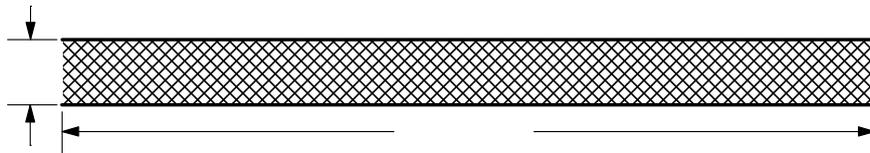
Tire Measurements



Partial Tire Impression

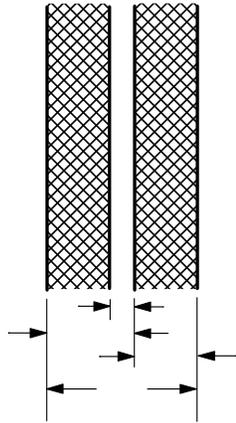


Complete Tire Rotation

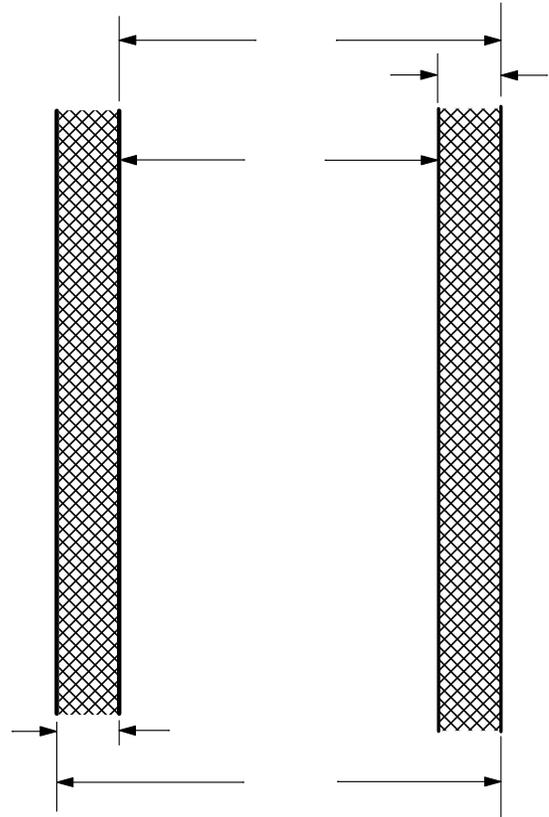


Tire Impressions Located at Scene

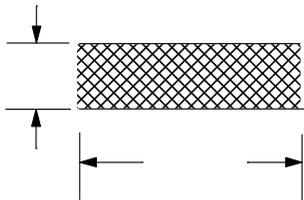
Dual Wheel Tire Impressions



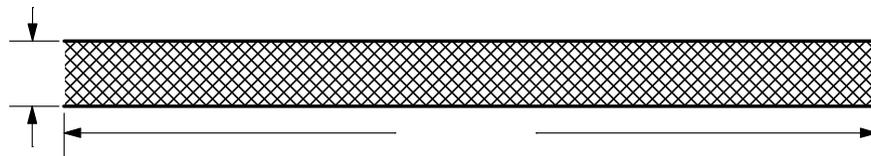
Tire Measurements



Partial Tire Impression



Complete Tire Rotation



**ALTERNATE LIGHT SOURCE**

	<b>Yes</b>	<b>No</b>
Was the ALS used at the scene?		
Was the victim's body processed at the scene with the ALS?		

If not, where? \_\_\_\_\_  
 Victim's body processed by: \_\_\_\_\_

	<b>Yes</b>	<b>No</b>
Was the scene & victim processed for inherent luminescent prints?		
Was the body processed for bloody fingerprints?		
Was the body processed for bite mark evidence?		
Were any bite marks cast after photography?		
Were bruises or bruising photographed on the body?		
Was UV light used to search for bruising not yet visible?		
Were scales used when photographing items on the body?		
Was the body processed for hairs?		
Was the body processed for fibers?		
Was the body superglue fumed?		
Was Amido Black used on the body?		
Were fluorescent powders used on the body?		

**CRIME SCENE SEARCH**

	<b>Yes</b>	<b>No</b>
Lane or Line Search (Exterior Scene)		
Spiral Search (Exterior Scene)		
Pie or Wheel Search (Exterior Scene)		
Grid Search (Interior or Exterior Scene)		
Zone Search (Interior Search or Vehicle)		
Was a metal detector used during the above searches?		
Has the street been thoroughly searched?		
Has the front, rear and side yards of the scene been searched?		
Have the yards of adjacent businesses or residences been searched?		
Have nearby trash cans and dumpsters been searched?		
Have all dirt locations nearby checked for shoe or tire evidence?		
Have any nearby wooded areas been searched?		
Have the walls, floors, ceilings and furniture been search fully?		
What interior lights were on or off?		
Were the walls checked behind pictures, posters, mirrors, etc.?		
Were the trash cans searched for papers, weapons, drugs, etc.?		
If a firearm was used, did you find any shell casings?		
Are there bullet holes in walls, doors, furniture, etc.?		
Can a bullet trajectory be documented?		
Was a search conducted under the body after removal?		

**POINT OF ENTRY (POE)**

Front door \_\_\_\_\_ Rear door \_\_\_\_\_ Garage door \_\_\_\_\_  
Side door \_\_\_\_\_ Patio door \_\_\_\_\_ Window AC unit \_\_\_\_\_  
Knocked hole in wall \_\_\_\_\_ Roof vent \_\_\_\_\_ Unknown \_\_\_\_\_

**POINT OF EXIT**

Front door \_\_\_\_\_ Rear door \_\_\_\_\_ Garage door \_\_\_\_\_  
Side door \_\_\_\_\_ Patio door \_\_\_\_\_ Window AC unit \_\_\_\_\_  
Knocked hole in wall \_\_\_\_\_ Roof vent \_\_\_\_\_ Unknown \_\_\_\_\_

Were shoe impressions observed? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

Where: \_\_\_\_\_  
\_\_\_\_\_

Were tire impressions observed? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

Where: \_\_\_\_\_  
\_\_\_\_\_

Were bloody prints observed? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

Where: \_\_\_\_\_  
\_\_\_\_\_

Were tool mark impressions found? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

Where: \_\_\_\_\_  
\_\_\_\_\_

Was an electrostatic dustprint lifter used on floors, counters, etc.? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

Was all impression evidence photographed and then cast? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**COLLECTION OF PHYSICAL EVIDENCE**

	<b>Yes</b>	<b>No</b>
Has all physical evidence been packaged individually?		
Has all biological evidence been collected with a new and sterile utensil?		
Has all biological evidence been marked with a biohazard label?		
If required, has biological evidence been placed into refrigeration?		
Has all physical evidence been submitted into the property room?		

Submitted by: \_\_\_\_\_ I.D. # \_\_\_\_\_

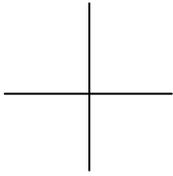
Date submitted: \_\_\_\_\_ Time submitted: \_\_\_\_\_

Property room submission #: \_\_\_\_\_



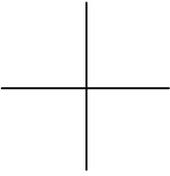


**ROUGH SKETCH**



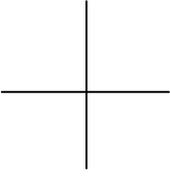


**ROUGH SKETCH**



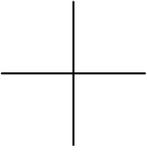


**ROUGH SKETCH**



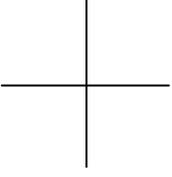


**ROUGH SKETCH**



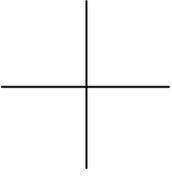


**ROUGH SKETCH**

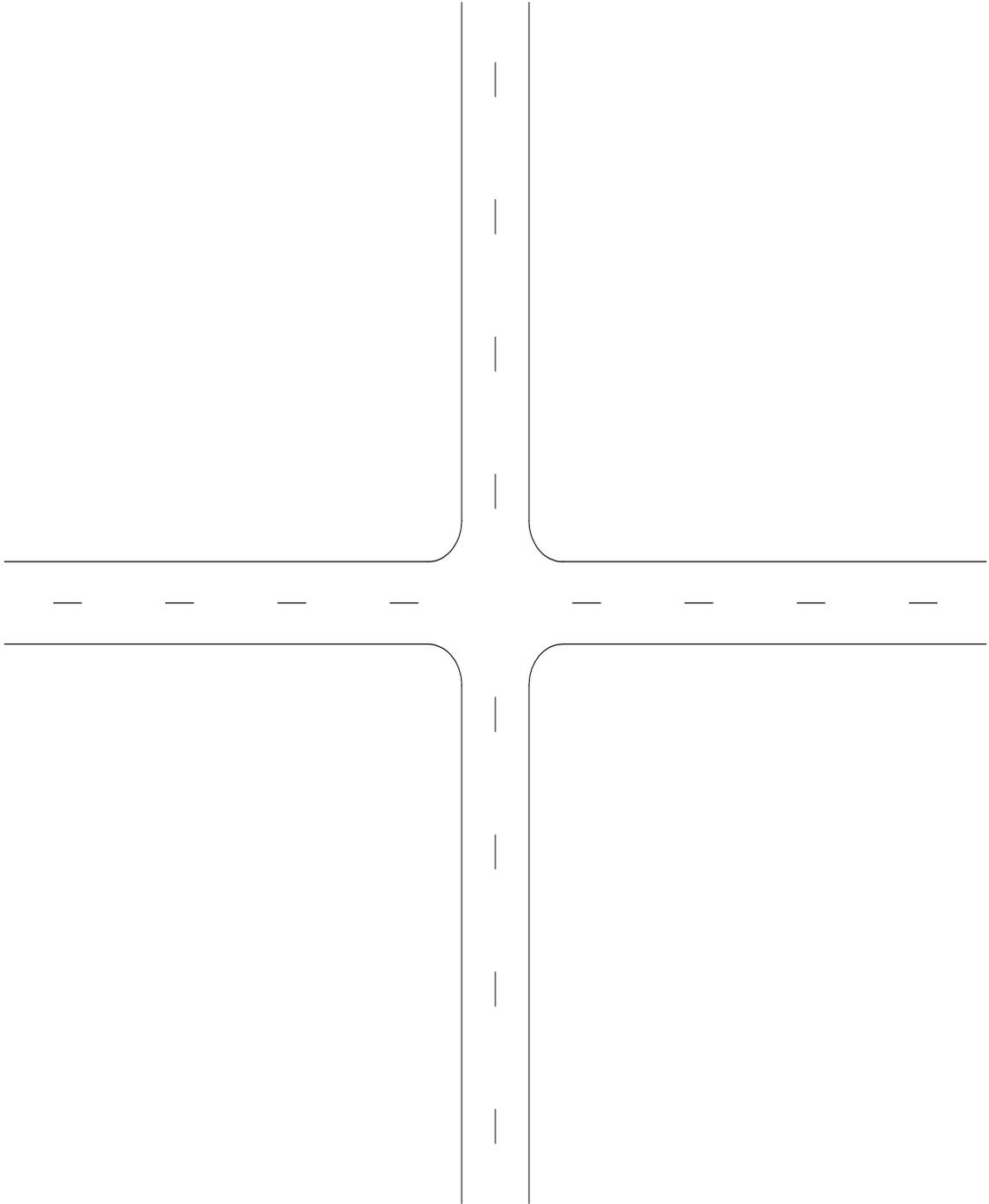


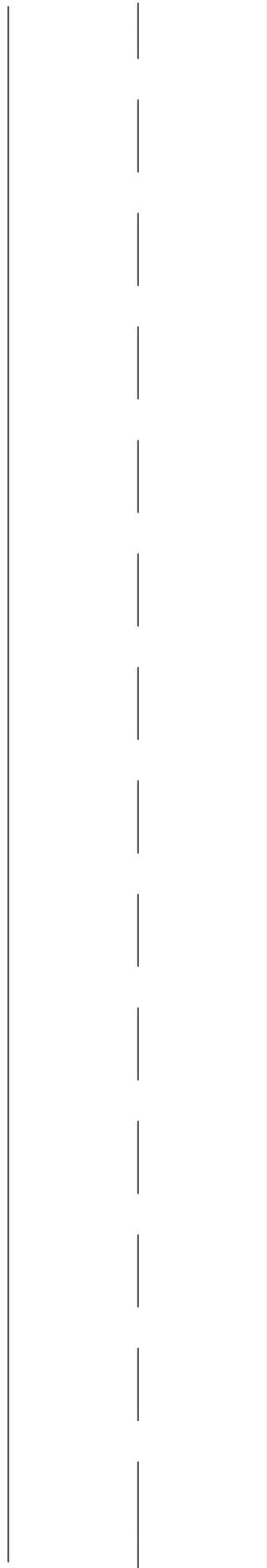


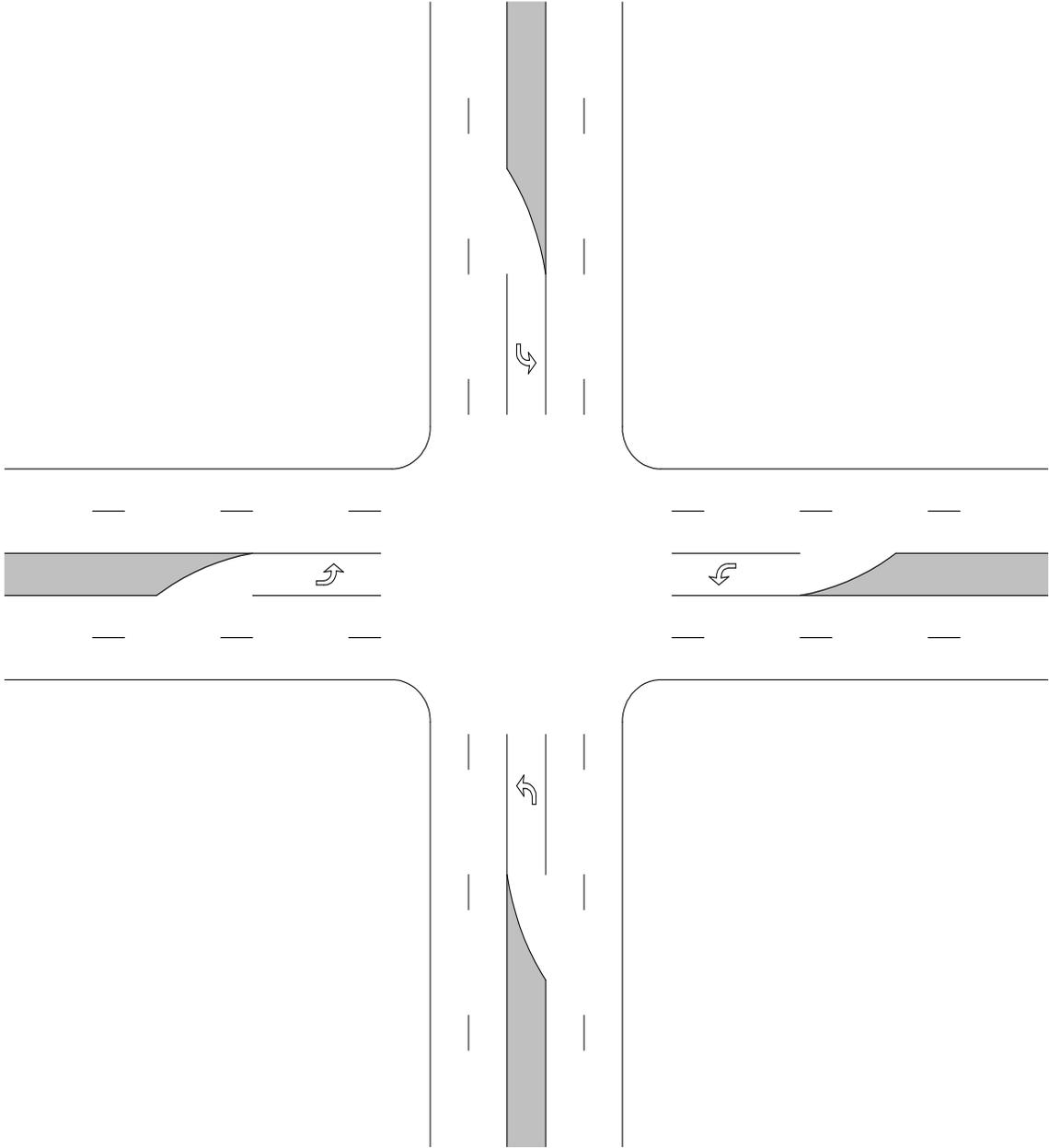
**ROUGH SKETCH**

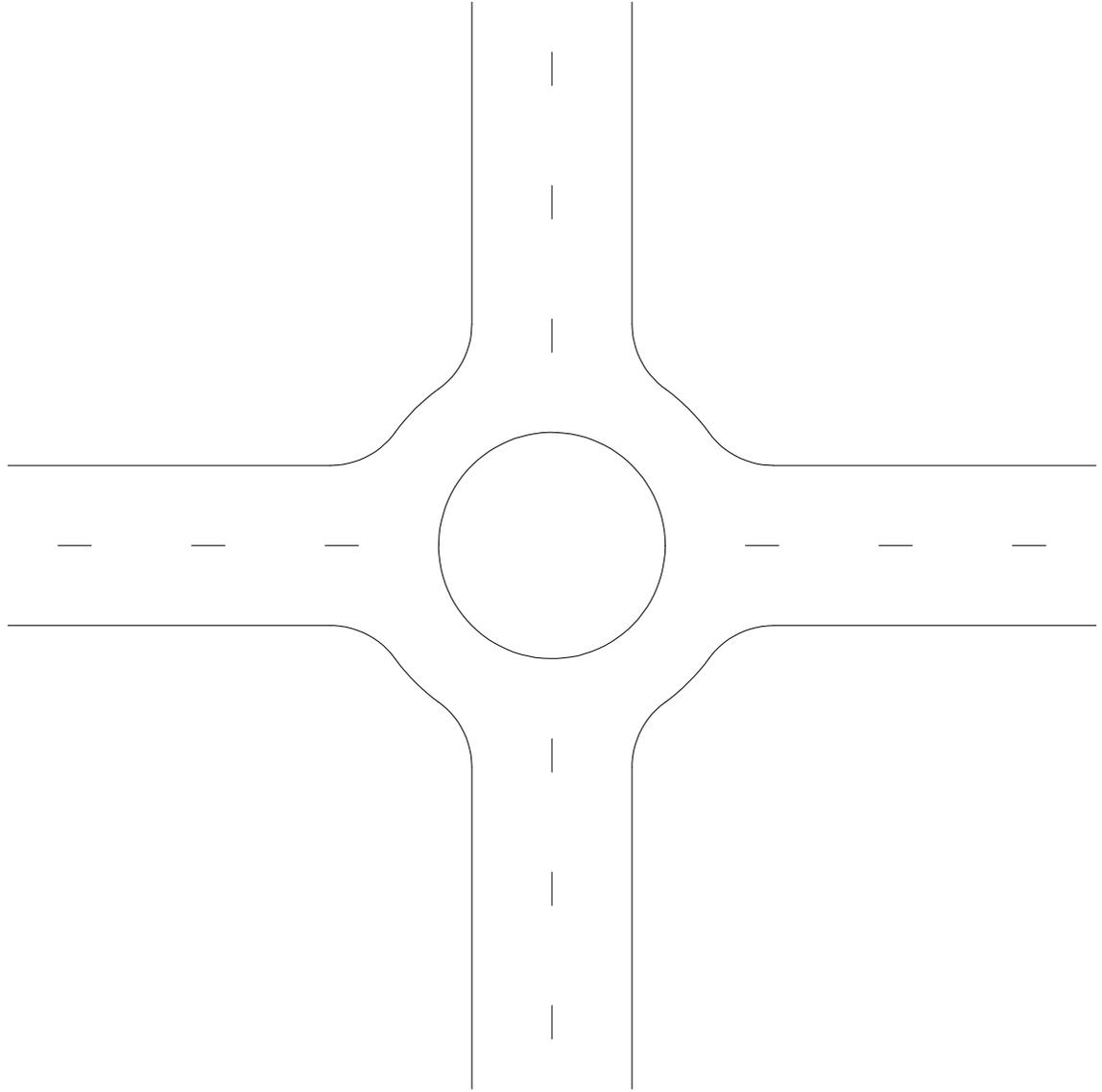


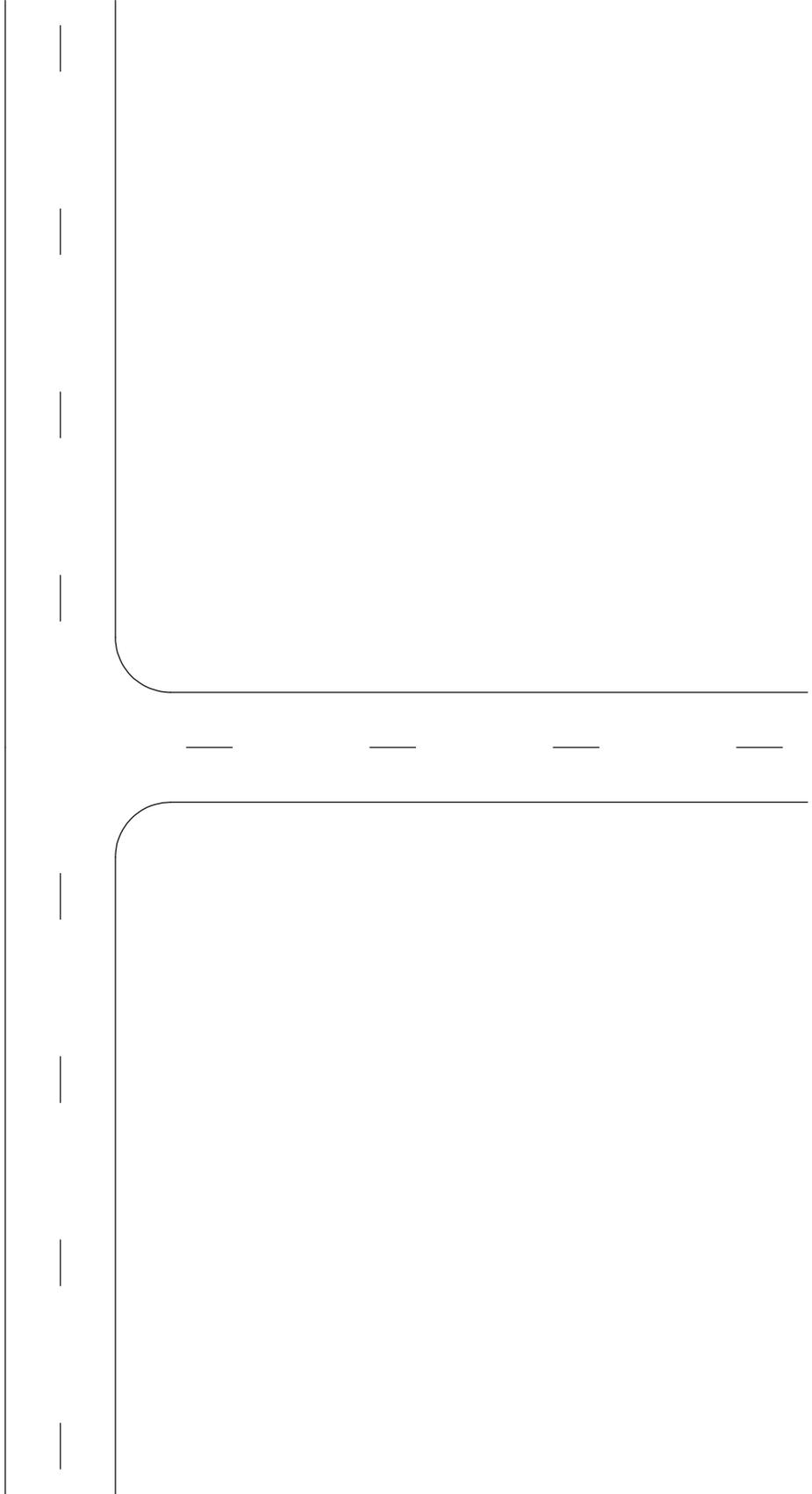




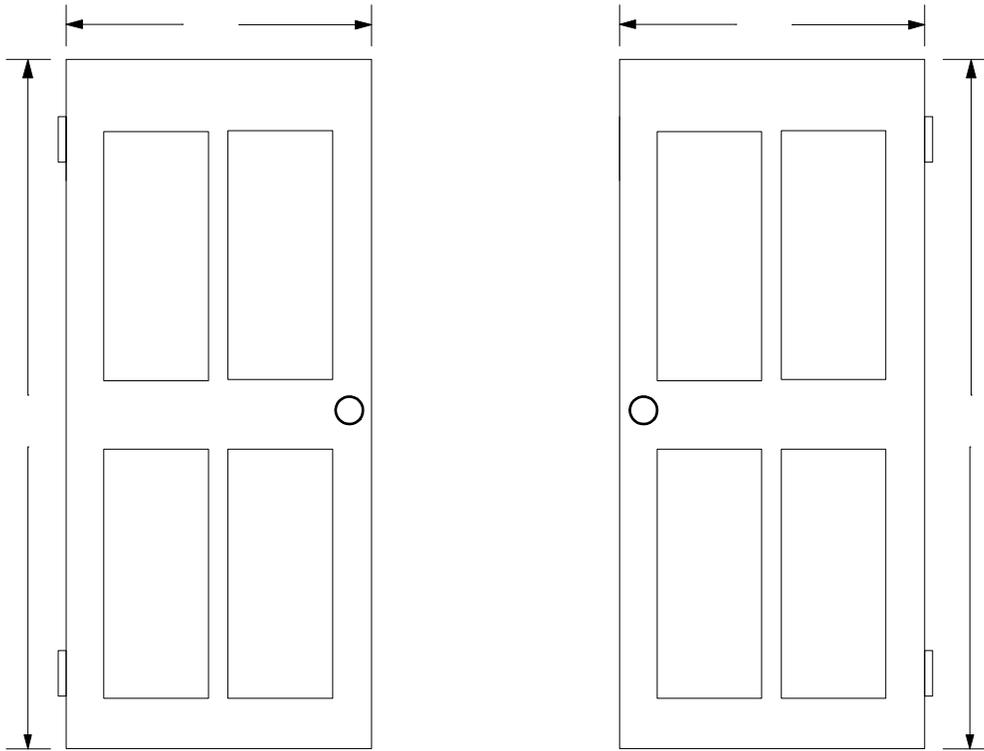




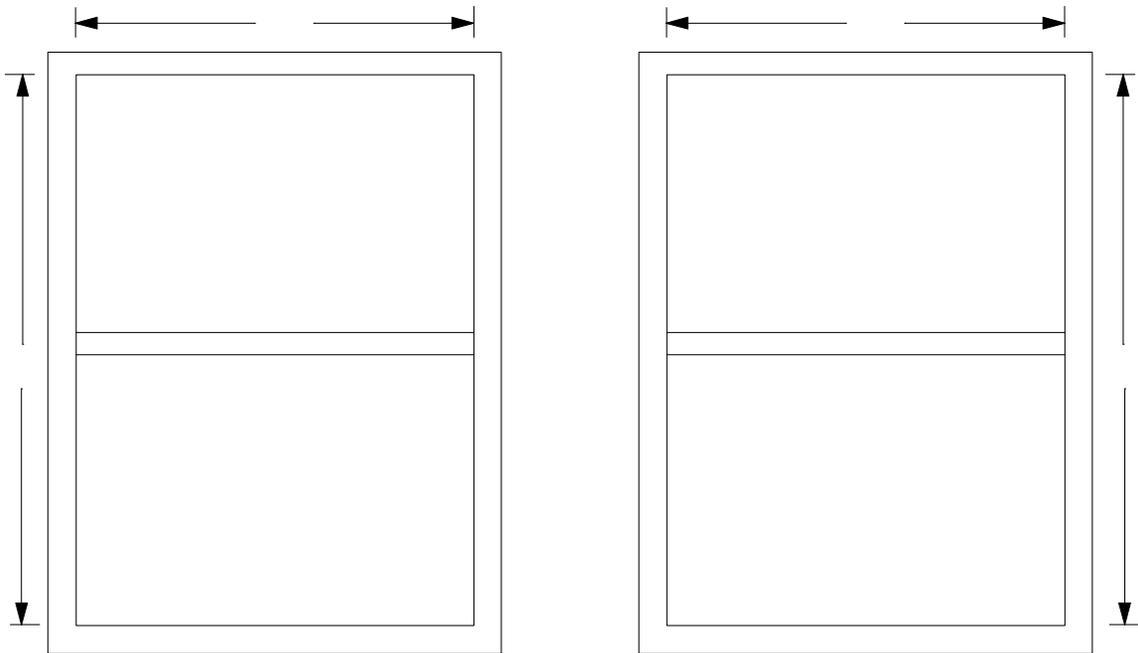




**DOORS**



**WINDOWS**

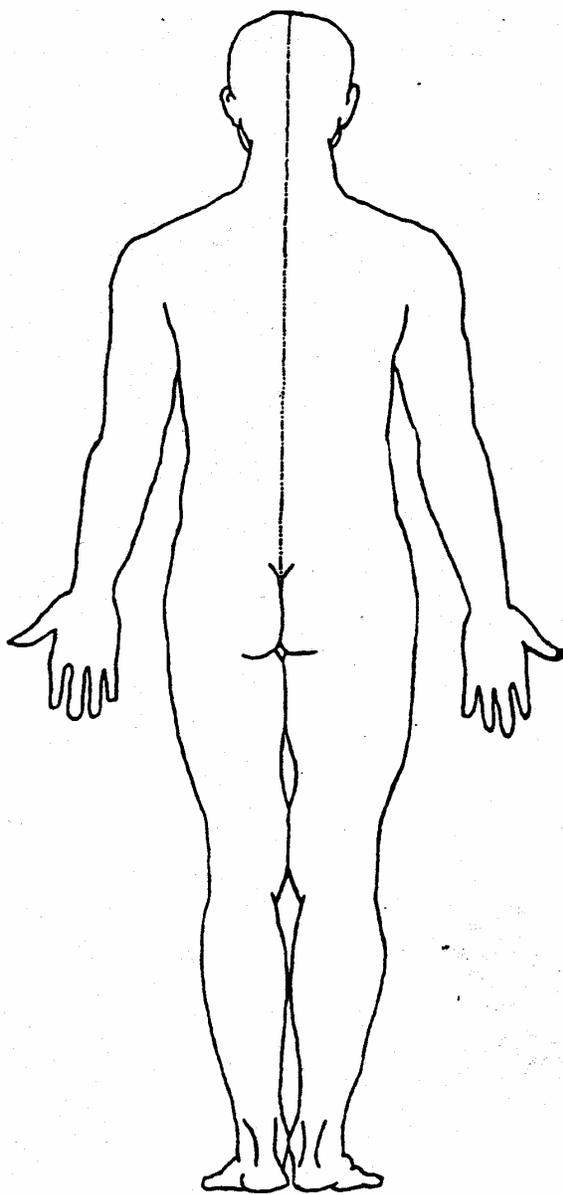
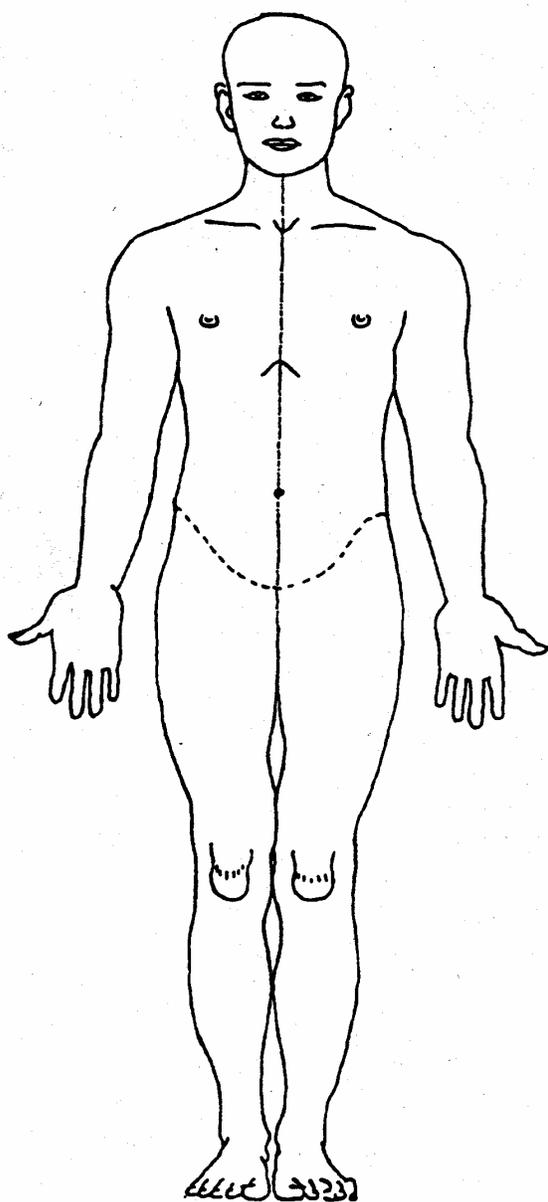
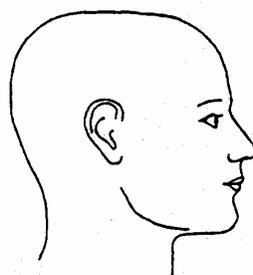
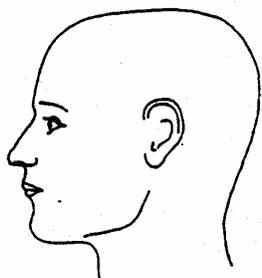


WALLS





VICTIM #1  
BODY DIAGRAMS



**GUNSHOT WOUND INFORMATION, VICTIM #1**

Contact Gunshot Wound Yes \_\_\_\_\_ No \_\_\_\_\_  
 Close Range Gunshot Wound Yes \_\_\_\_\_ No \_\_\_\_\_  
 Medium Range Gunshot Wound Yes \_\_\_\_\_ No \_\_\_\_\_  
 Long Range Gunshot Wound Yes \_\_\_\_\_ No \_\_\_\_\_  
 How many entrance wounds? 1 2 3 4 5 6 7 8 9 10 Unk. \_\_\_\_\_  
 How many exit wounds? 1 2 3 4 5 6 7 8 9 10 Unk. \_\_\_\_\_  
 Number of live bullets at scene. 1 2 3 4 5 6 7 8 9 10  
 Number of spent shell casings at the scene. 1 2 3 4 5 6 7 8 9 10  
 Number of projectiles found at the scene. 1 2 3 4 5 6 7 8 9 10  
 Is a weapon present near the body? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Is the bullet wound to the left side, right side, front, back? \_\_\_\_\_  
 Is the victim left handed or right handed? \_\_\_\_\_

If victim is deceased and suffers from gunshot wounds, can an accurate trajectory be determined through the body (front to back, upward angle, downward angle, left to right, etc.)? This information should be obtained at autopsy.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Floor to entry wound # 1 \_\_\_\_\_' \_\_\_\_\_" Floor to exit wound # 1 \_\_\_\_\_' \_\_\_\_\_"  
 Floor to entry wound # 2 \_\_\_\_\_' \_\_\_\_\_" Floor to exit wound # 2 \_\_\_\_\_' \_\_\_\_\_"  
 Floor to entry wound # 3 \_\_\_\_\_' \_\_\_\_\_" Floor to exit wound # 3 \_\_\_\_\_' \_\_\_\_\_"  
 Floor to entry wound # 4 \_\_\_\_\_' \_\_\_\_\_" Floor to exit wound # 4 \_\_\_\_\_' \_\_\_\_\_"  
 Floor to entry wound # 5 \_\_\_\_\_' \_\_\_\_\_" Floor to exit wound # 5 \_\_\_\_\_' \_\_\_\_\_"

If the suspect is in custody, measure distance from bottom of feet to waistline and to top of shoulder: (This information will assist when determining bullet trajectories)

Floor to Waist: \_\_\_\_\_' \_\_\_\_\_" Floor to Shoulders: \_\_\_\_\_' \_\_\_\_\_"  
 Left Arm Shoulder to Wrist \_\_\_\_\_' \_\_\_\_\_" Right Arm Shoulder to Wrist \_\_\_\_\_' \_\_\_\_\_"

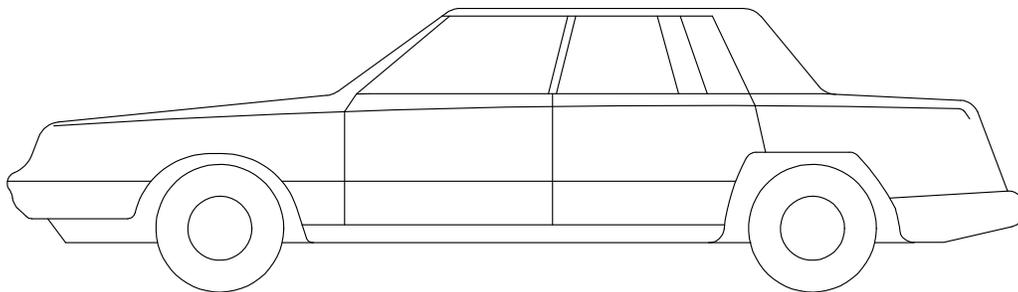
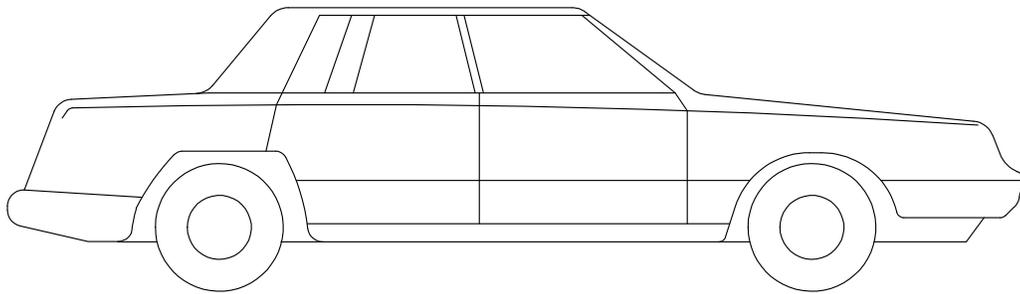
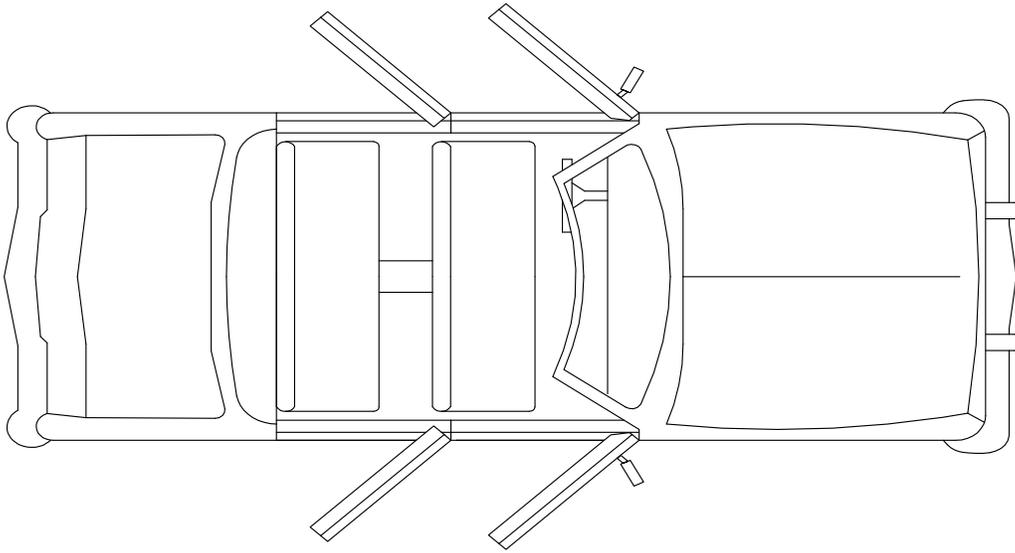
**BITE MARKS**

	Yes	No
Were bite marks present on the victim's body?		
Were the bite marks photographed using the proper procedure?		
Were the areas of the bite mark swabbed for DNA evidence?		
Was the bite mark cast with Mikrosil or other casting material?		
Was a Forensic Odontologist notified and requested to respond?		



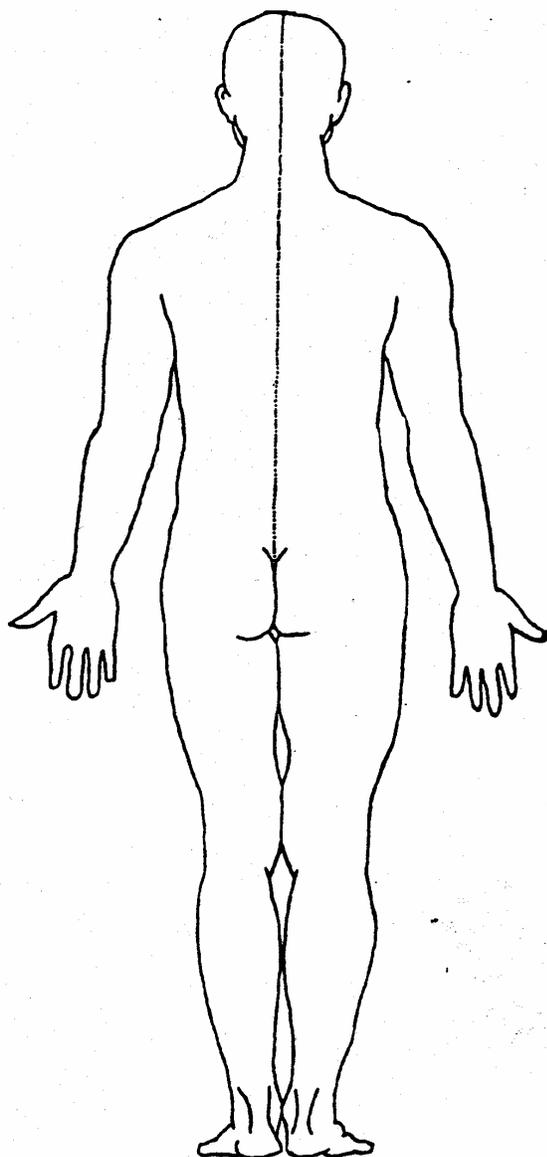
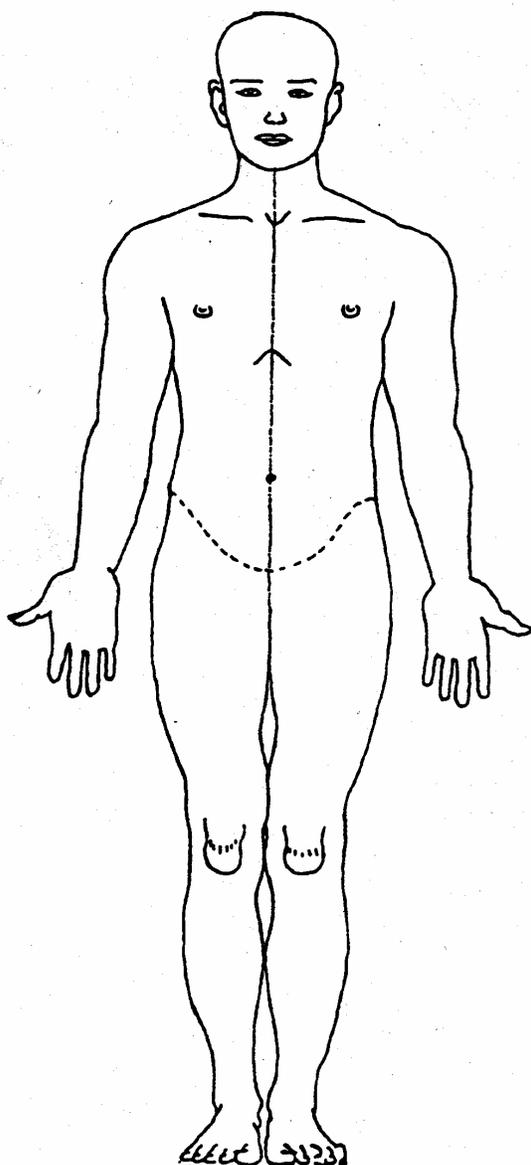
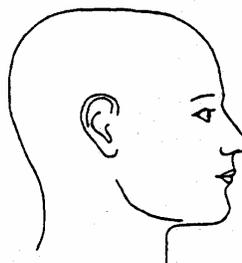
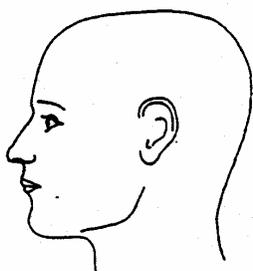


**VICTIM #1'S VEHICLE**





VICTIM #2  
BODY DIAGRAMS



**GUNSHOT WOUND INFORMATION, VICTIM #2**

Contact Gunshot Wound Yes \_\_\_\_\_ No \_\_\_\_\_  
 Close Range Gunshot Wound Yes \_\_\_\_\_ No \_\_\_\_\_  
 Medium Range Gunshot Wound Yes \_\_\_\_\_ No \_\_\_\_\_  
 Long Range Gunshot Wound Yes \_\_\_\_\_ No \_\_\_\_\_  
 How many entrance wounds? 1 2 3 4 5 6 7 8 9 10 Unk. \_\_\_\_\_  
 How many exit wounds? 1 2 3 4 5 6 7 8 9 10 Unk. \_\_\_\_\_  
 Number of live bullets at scene. 1 2 3 4 5 6 7 8 9 10  
 Number of spent shell casings at the scene. 1 2 3 4 5 6 7 8 9 10  
 Number of projectiles found at the scene. 1 2 3 4 5 6 7 8 9 10  
 Is a weapon present near the body? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Is the bullet wound to the left side, right side, front, back? \_\_\_\_\_  
 Is the victim left handed or right handed? \_\_\_\_\_  
 Was GSR test performed on the victim? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Was GSR test performed on the suspect? Yes \_\_\_\_\_ No \_\_\_\_\_

If victim is deceased and suffers from gunshot wounds, can an accurate trajectory be determined through the body (front to back, upward angle, downward angle, left to right, etc.)? This information should be obtained at autopsy.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Floor to entry wound # 1 \_\_\_\_\_' \_\_\_\_\_" Floor to exit wound # 1 \_\_\_\_\_' \_\_\_\_\_"  
 Floor to entry wound # 2 \_\_\_\_\_' \_\_\_\_\_" Floor to exit wound # 2 \_\_\_\_\_' \_\_\_\_\_"  
 Floor to entry wound # 3 \_\_\_\_\_' \_\_\_\_\_" Floor to exit wound # 3 \_\_\_\_\_' \_\_\_\_\_"  
 Floor to entry wound # 4 \_\_\_\_\_' \_\_\_\_\_" Floor to exit wound # 4 \_\_\_\_\_' \_\_\_\_\_"  
 Floor to entry wound # 5 \_\_\_\_\_' \_\_\_\_\_" Floor to exit wound # 5 \_\_\_\_\_' \_\_\_\_\_"

If the suspect is in custody, measure distance from bottom of feet to waistline and to top of shoulder: (This information will assist when determining bullet trajectories)

Floor to Waist: \_\_\_\_\_' \_\_\_\_\_" Floor to Shoulders: \_\_\_\_\_' \_\_\_\_\_"  
 Left Arm Shoulder to Wrist \_\_\_\_\_' \_\_\_\_\_" Right Arm Shoulder to Wrist \_\_\_\_\_' \_\_\_\_\_"

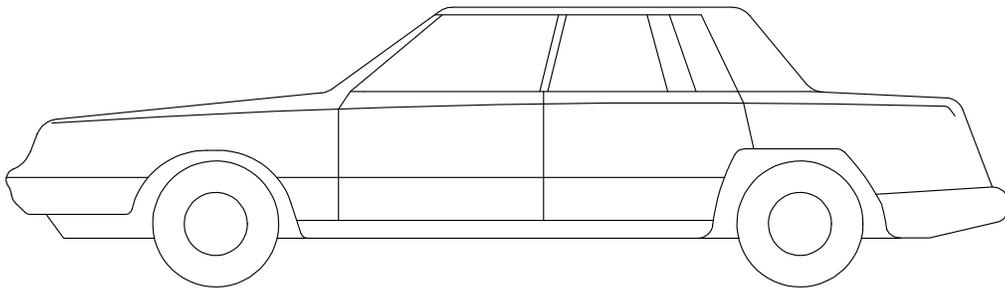
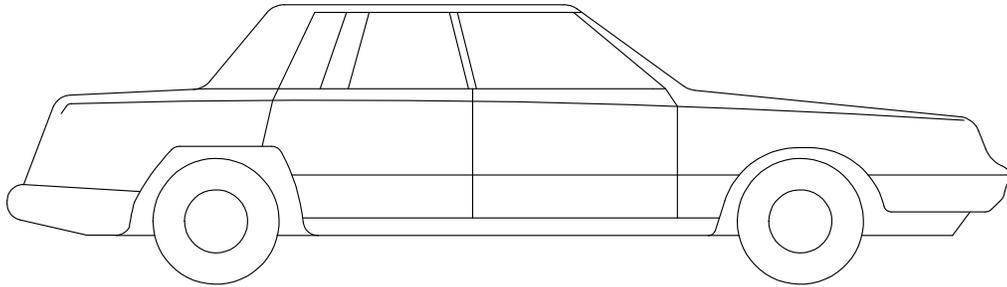
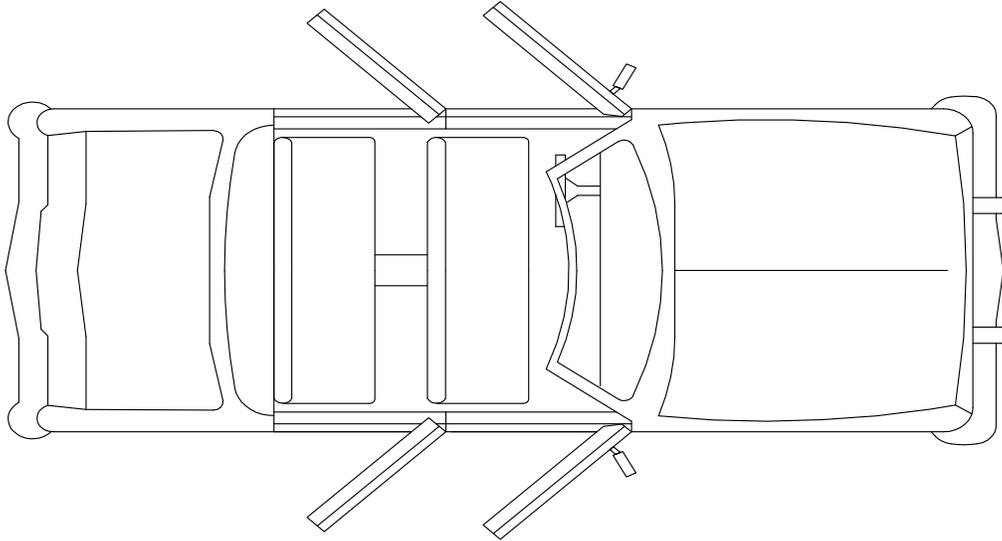
**BITE MARKS**

	Yes	No
Were bite marks present on the victim's body?		
Were the bite marks photographed using the proper procedure?		
Were the areas of the bite mark swabbed for DNA evidence?		
Was the bite mark cast with Mikrosil or other casting material?		
Was a Forensic Odontologist notified and requested to respond?		





**VICTIM #2'S VEHICLE**



## FIREARM INFORMATION

### Firearm # 1

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial #: \_\_\_\_\_

Caliber: \_\_\_\_\_ Revolver: \_\_\_\_\_ Semi-Auto Pistol: \_\_\_\_\_ Rifle: \_\_\_\_\_

Shotgun: \_\_\_\_\_ Loaded: \_\_\_\_\_ Unloaded: \_\_\_\_\_

Is there a live bullet in the chamber? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

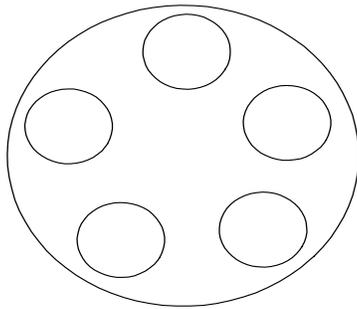
Is there a spent casing in the chamber? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

Number of bullets in magazine: \_\_\_\_\_

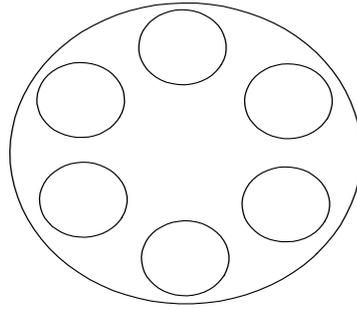
Number of bullets in cylinder: \_\_\_\_\_

Number of spent casings in cylinder: \_\_\_\_\_

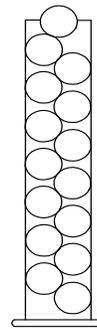
	Yes	No
Is there blood evidence on the firearm?		
Is there blow back on the firearm?		
Was the firearm superglue fumed?		



5 - shot

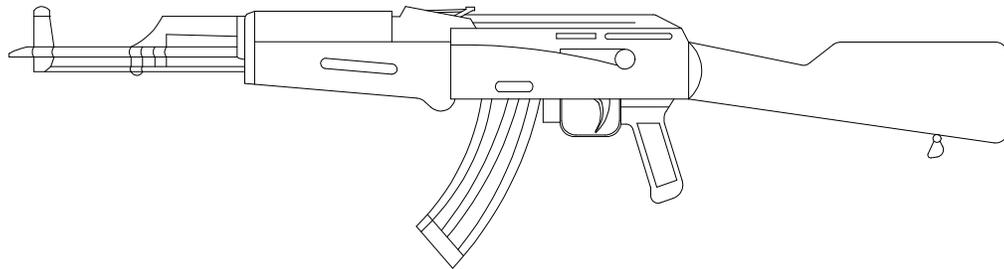
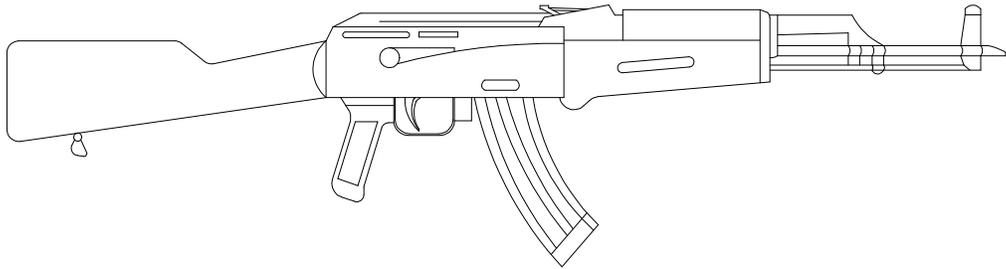
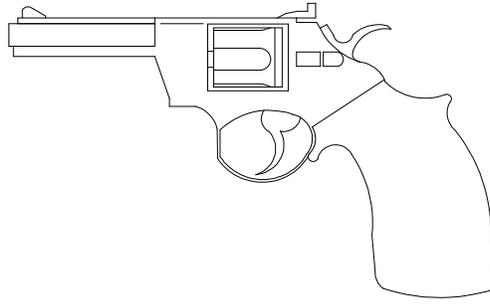
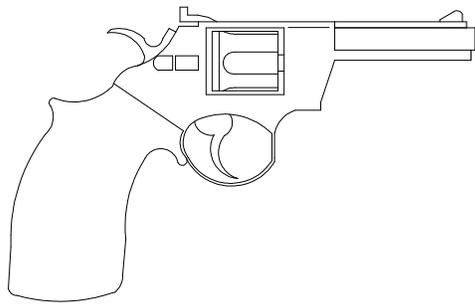
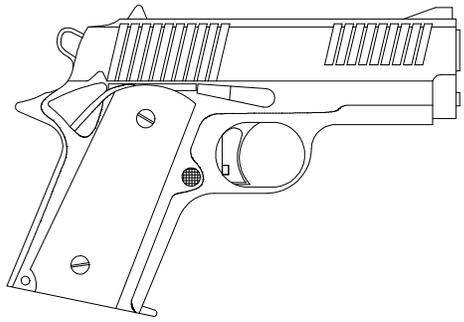


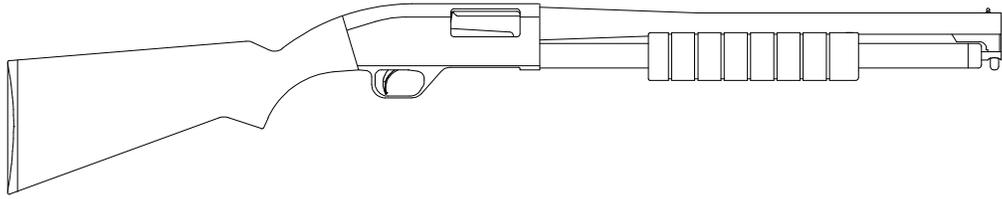
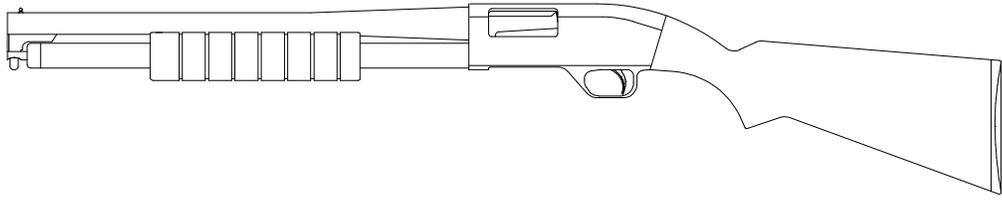
6 - shot



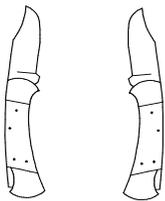
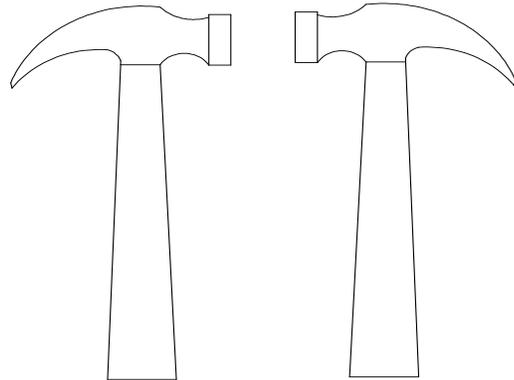
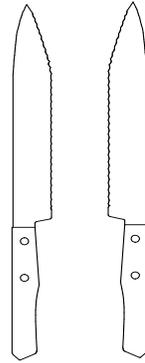
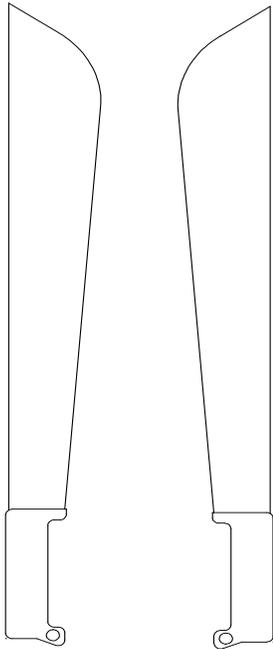
Magazine

S = Spent    E = Empty    L = Live





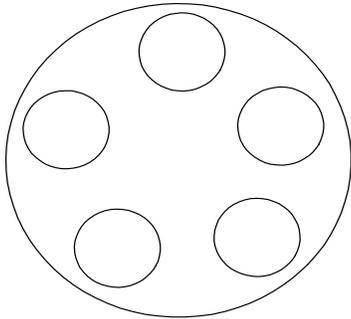
**OTHER WEAPONS**



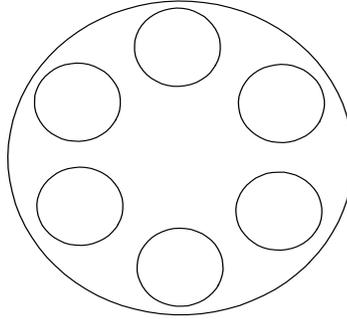
## Firearm # 2

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial #: \_\_\_\_\_  
 Caliber: \_\_\_\_\_ Revolver: \_\_\_\_\_ Semi-Auto Pistol: \_\_\_\_\_ Rifle: \_\_\_\_\_ Shotgun: \_\_\_\_\_  
 Loaded: \_\_\_\_\_  
 Unloaded: \_\_\_\_\_  
 Number of bullets in magazine: \_\_\_\_\_  
 Number of bullets in cylinder: \_\_\_\_\_  
 Number of spent casings in cylinder: \_\_\_\_\_  
 Barrel Length: \_\_\_\_\_

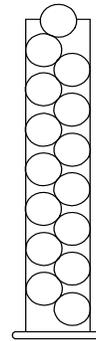
	Yes	No
Is there blood evidence on the firearm?		
Is there blow back on the firearm?		
Was the firearm superglue fumed?		



5 - shot

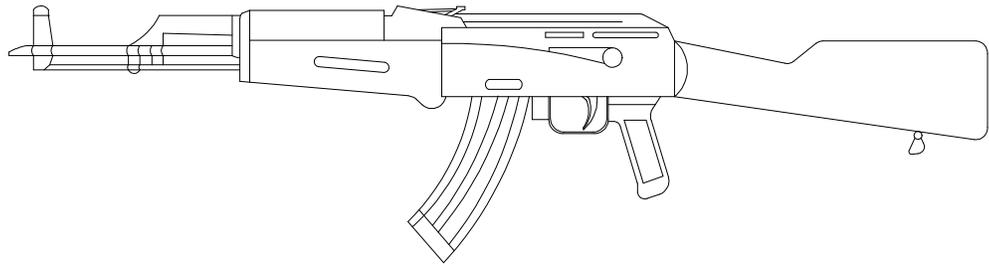
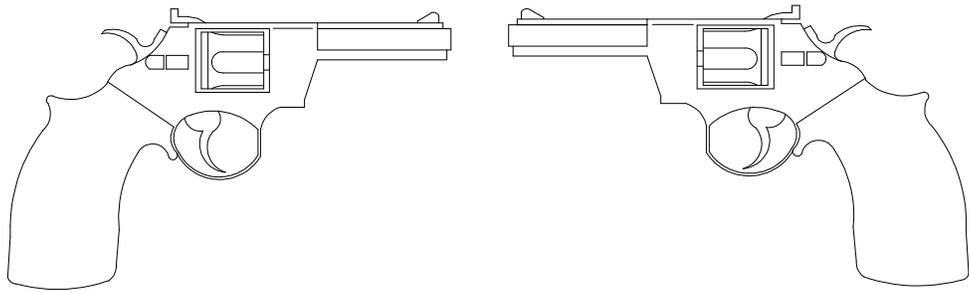
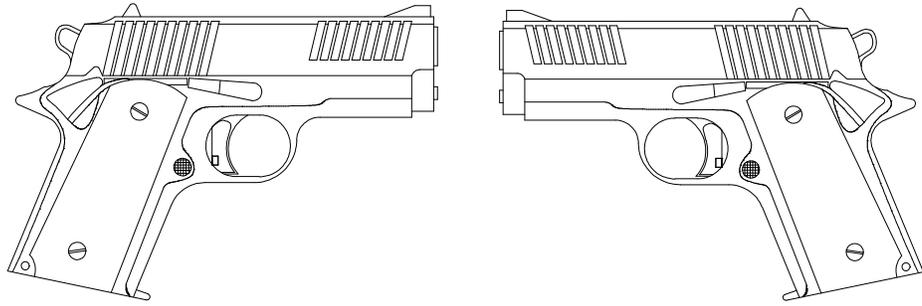


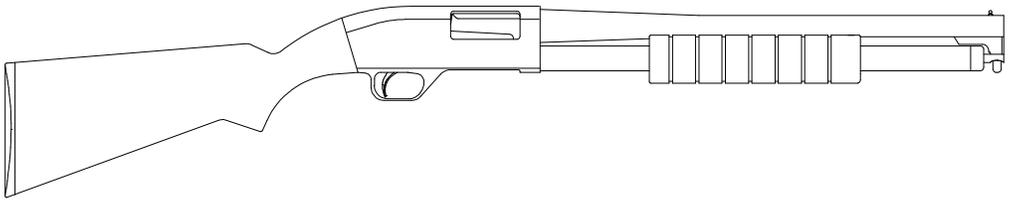
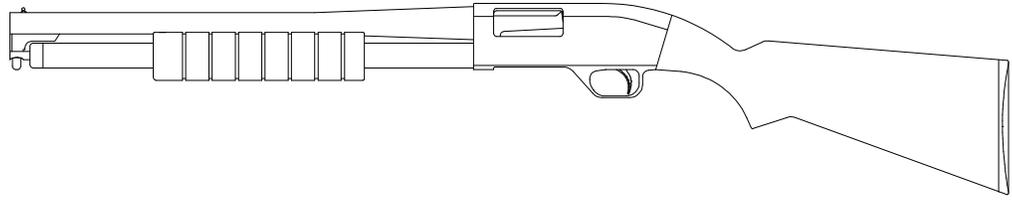
6 - shot



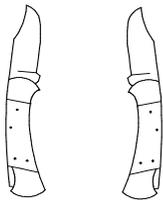
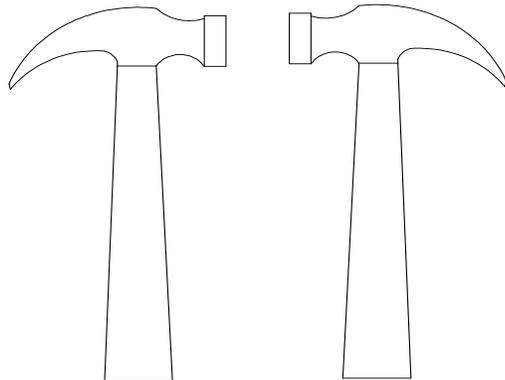
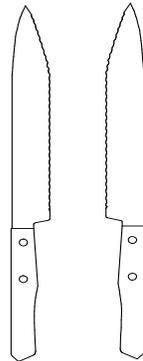
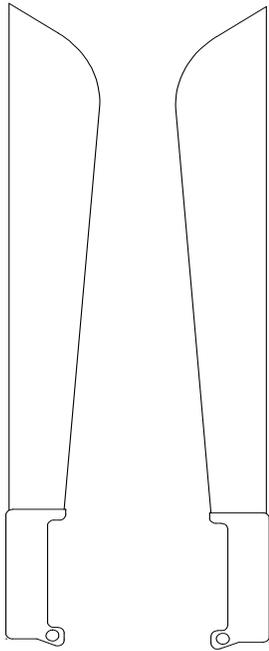
Magazine

S = Spent    E = Empty    L = Live



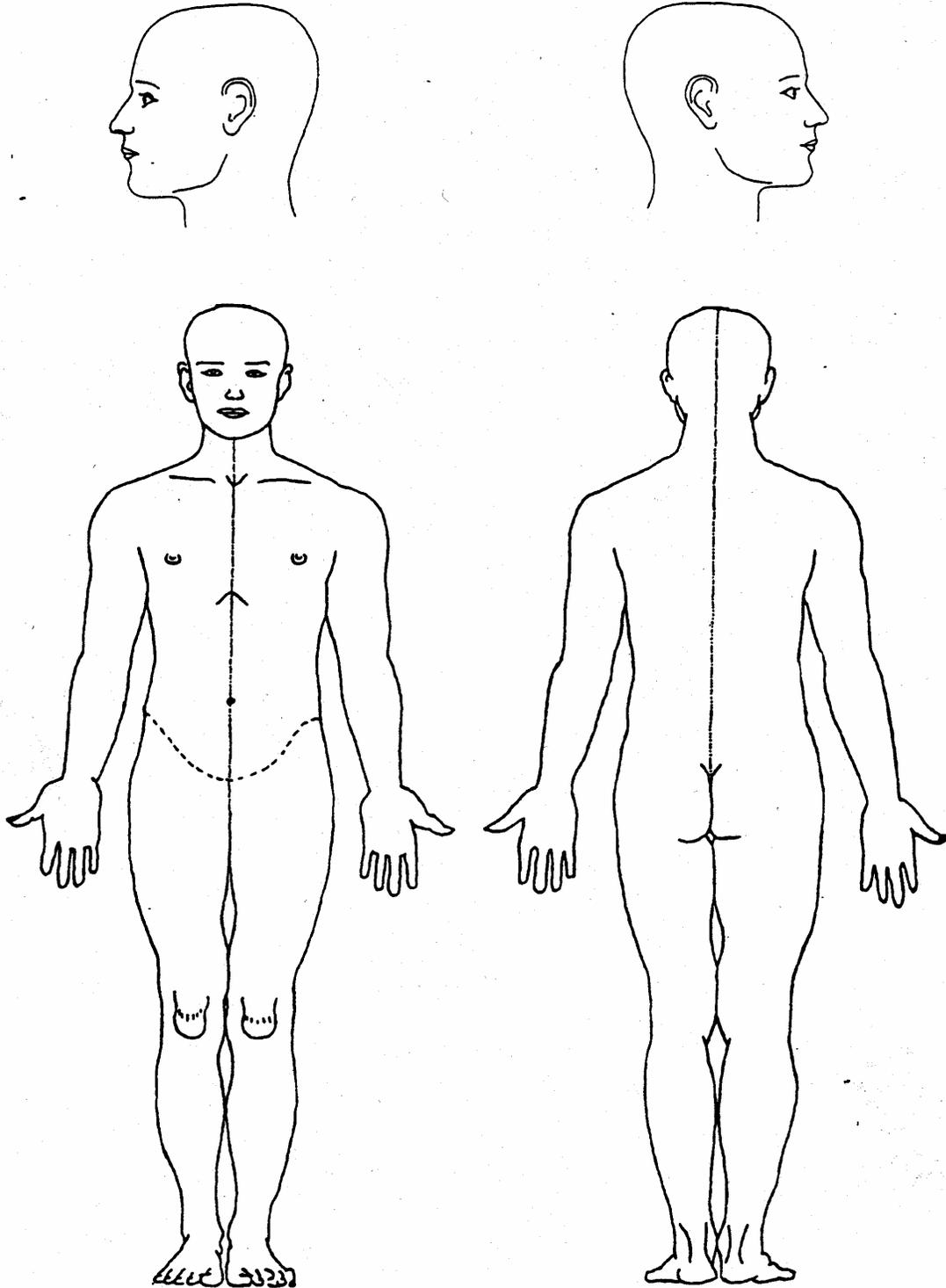


**OTHER WEAPONS**



**ENTOMOLOGICAL OBSERVATIONS & COLLECTIONS**

**BODY DIAGRAMS**



**Describe Areas on Body where Bug Activity is Observed – Maggot Mass', Eggs, etc.**

**ENTOMOLOGICAL DATA**

<b>I/S House</b> _____	<b>I/S Building</b> _____	<b>I/S Vehicle</b> _____
<b>Street</b> _____	<b>Vacant Lot</b> _____	<b>Dumpster</b> _____
<b>Trash Bag</b> _____	<b>Sealed Box</b> _____	<b>Woods</b> _____
<b>Field</b> _____	<b>Ditch</b> _____	<b>Pasture</b> _____
<b>Brush</b> _____	<b>River</b> _____	<b>Creek</b> _____
<b>Stream</b> _____	<b>Pond</b> _____	<b>Canal</b> _____

**What is the duration of time the body was exposed to:**

**Direct Sun** \_\_\_\_\_ **Partial Sun** \_\_\_\_\_ **Full Shade** \_\_\_\_\_

**Soil temperature under body immediately after removal:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**The following observations should be recorded every 15 to 30 minutes:**

<b>Observation #1</b>	<b>Temperature &amp; Time</b>	
O/S Air Temperature @ 4' Level	_____	_____
O/S Air Temperature @ 1' Level	_____	_____
I/S Structure Temperature @ 4' Level	_____	_____
I/S Structure Temperature @ 1' Level	_____	_____
Body Surface Temperature	_____	_____
Soil @ 10cm (4")	_____	_____
Soil @ 20cm (8")	_____	_____
Soil @ Ground Level, Under Grass/Leaves	_____	_____
Under Body Interface (Where Ground & Body Meet)	_____	_____
Maggot Mass #1	_____	_____
Maggot Mass #2	_____	_____
Maggot Mass #3	_____	_____
Maggot Mass #4	_____	_____
Water Temperature	_____	_____
Humidity	_____	_____

<b>Observation #2</b>	<b>Temperature &amp; Time</b>	
O/S Air Temperature @ 4' Level	_____	_____
O/S Air Temperature @ 1' Level	_____	_____
I/S Structure Temperature @ 4' Level	_____	_____
I/S Structure Temperature @ 1' Level	_____	_____
Body Surface Temperature	_____	_____
Soil @ 10cm (4")	_____	_____
Soil @ 20cm (8")	_____	_____
Soil @ Ground Level, Under Grass/Leaves	_____	_____
Under Body Interface (Where Ground & Body Meet)	_____	_____
Maggot Mass #1	_____	_____
Maggot Mass #2	_____	_____
Maggot Mass #3	_____	_____



Soil @ 10cm (4")	_____	_____
Soil @ 20cm (8")	_____	_____
Soil @ Ground Level, Under Grass/Leaves	_____	_____
Under Body Interface (Where Ground & Body Meet)	_____	_____
Maggot Mass #1	_____	_____
Maggot Mass #2	_____	_____
Maggot Mass #3	_____	_____
Maggot Mass #4	_____	_____
Water Temperature	_____	_____
Humidity	_____	_____

**Observation #6**

**Temperature & Time**

O/S Air Temperature @ 4' Level	_____	_____
O/S Air Temperature @ 1' Level	_____	_____
I/S Structure Temperature @ 4' Level	_____	_____
I/S Structure Temperature @ 1' Level	_____	_____
Body Surface Temperature	_____	_____
Soil @ 10cm (4")	_____	_____
Soil @ 20cm (8")	_____	_____
Soil @ Ground Level, Under Grass/Leaves	_____	_____
Under Body Interface (Where Ground & Body Meet)	_____	_____
Maggot Mass #1	_____	_____
Maggot Mass #2	_____	_____
Maggot Mass #3	_____	_____
Maggot Mass #4	_____	_____
Water Temperature	_____	_____
Humidity	_____	_____

**Observation #7**

**Temperature & Time**

O/S Air Temperature @ 4' Level	_____	_____
O/S Air Temperature @ 1' Level	_____	_____
I/S Structure Temperature @ 4' Level	_____	_____
I/S Structure Temperature @ 1' Level	_____	_____
Body Surface Temperature	_____	_____
Soil @ 10cm (4")	_____	_____
Soil @ 20cm (8")	_____	_____
Soil @ Ground Level, Under Grass/Leaves	_____	_____
Under Body Interface (Where Ground & Body Meet)	_____	_____
Maggot Mass #1	_____	_____
Maggot Mass #2	_____	_____
Maggot Mass #3	_____	_____
Maggot Mass #4	_____	_____
Water Temperature	_____	_____
Humidity	_____	_____







**RELEASE OF THE CRIME SCENE**

**LOOK OVER THE CRIME SCENE FROM THE PERSPECTIVE OF THE PUBLIC DEFENDER AND THE PROSECUTOR. MAKE SURE YOU HAVE GATHERED ALL POSSIBLE INFORMATION AND PERFORMED EACH PROCESS AVAILABLE TO ENSURE A SUCCESSFUL PROSECUTION.**

**THE CRIME SCENE CHECKLIST SHOULD BE FILLED OUT AT THE CRIME SCENE DURING THE PROCESSING. THE CHECKLIST SHOULD ACT AS A REMINDER OF THE PROCESSES AND PROCEDURES THAT SHOULD BE PERFORMED OR AT LEAST CONSIDERED WHILE STILL AT THE SCENE.**

	Yes	No
Have you reviewed the checklist?		
Have you collected all evidence?		
Have you taken all necessary photographs?		
Have you cleaned up all trash around the crime scene?		
Have you contacted the lead detective?		
Can the crime scene be released?		
Does the crime scene need to be held for further processing?		
Have all Biohazards been collected and disposed of properly?		
Has all equipment been cleaned with a 1:10 bleach solution?		

If further processing is necessary, describe:

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Crime scene released on \_\_\_\_/\_\_\_\_/\_\_\_\_ at \_\_\_\_\_ hours.

Crime scene released per: Det. \_\_\_\_\_ ID #. \_\_\_\_\_

Secured from the Scene at \_\_\_\_\_ hours.

Completed Crime Scene Report on \_\_\_\_/\_\_\_\_/\_\_\_\_

Are crime scene diagrams and reports saved on disc? **Yes** \_\_\_\_ **No** \_\_\_\_

Major case file completed. **Yes** \_\_\_\_ **No** \_\_\_\_