

Laboratory Number: _____

Technical Review		Yes	N/A
Notes	Evidence description clear and consistent with RFA	<input type="checkbox"/>	<input type="checkbox"/>
	Case notes clear	<input type="checkbox"/>	<input type="checkbox"/>
Photographs	Included and correctly annotated (case number, item number, initials, and date)	<input type="checkbox"/>	<input type="checkbox"/>
Weights	All calculations checked	<input type="checkbox"/>	<input type="checkbox"/>
	Weight of group(s) and analyzed item(s) reported with appropriate weight type	<input type="checkbox"/>	<input type="checkbox"/>
Blanks	Run and data included (bracket samples)	<input type="checkbox"/>	<input type="checkbox"/>
Procedure Controls (positive and negative)	Run and data included	<input type="checkbox"/>	<input type="checkbox"/>
	Lot number documented	<input type="checkbox"/>	<input type="checkbox"/>
	Expiration date within procedure policy	<input type="checkbox"/>	<input type="checkbox"/>
Reference Standards	Run and data included	<input type="checkbox"/>	<input type="checkbox"/>
	Lot number documented	<input type="checkbox"/>	<input type="checkbox"/>
	Expiration date within procedure policy	<input type="checkbox"/>	<input type="checkbox"/>
Results	Supported by Technical Data	<input type="checkbox"/>	<input type="checkbox"/>
Methods	Appropriate and listed on report	<input type="checkbox"/>	<input type="checkbox"/>
Chain of custody (from JusticeTrax)	Reviewed and Logical	<input type="checkbox"/>	<input type="checkbox"/>
Data Backup	Completed and saved to appropriate location	<input type="checkbox"/>	<input type="checkbox"/>

Technical Reviewer: _____

Administrative Review		Yes	N/A
Demographic information	Suspect's Name	<input type="checkbox"/>	<input type="checkbox"/>
	Submitting Agency	<input type="checkbox"/>	<input type="checkbox"/>
	Agency case number	<input type="checkbox"/>	<input type="checkbox"/>
	Submission number(s)	<input type="checkbox"/>	<input type="checkbox"/>
Documentation	Cross outs initialed/dated (no obliterations)	<input type="checkbox"/>	<input type="checkbox"/>
	Description reviewed for typos	<input type="checkbox"/>	<input type="checkbox"/>
	Item numbers consistent	<input type="checkbox"/>	<input type="checkbox"/>
	Analyst's initials and case number on all pages	<input type="checkbox"/>	<input type="checkbox"/>

Administrative Reviewer: _____

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