



EVIDENCE SUBMISSION FORM (ESF)

The Commonwealth of Massachusetts
Department of State Police Forensic Services Group (FSG)
Sudbury Evidence Unit: (508) 358-3155 Fax: (508) 358-3222
Danvers Evidence Unit: (978) 538-6111 Fax: (978) 538-6112
Lakeville Evidence Unit: (508) 946-1310 Fax: (508) 946-1041
Springfield Evidence Unit: (413) 205-1837 Fax: (413) 205-1838

Place LIMS Barcode Label here or write assigned number below.

(Affix LIMS barcode label here.)

22-01586 - 4

MSPCL Case Number



Type of Case: Police Shooting Date of incident: 01/23/2022

Investigating Agency: MSP Middlesex County Detective Unit Investigating Agency Case #:

Incident Address: Baron Park Lane Incident Town: Burlington

Report to (Name): Trooper Mark F. Delaney #3779 Tel. #: (978) 679-6612 Email:

Table with columns: Victim/Other's Name(s), DOB, Sex, Race, Suspect's Name(s), DOB, Sex, Race, SSN#

Table with columns: List item description and owner's name (or origin) of each item separately, Recovery Location, Analysis Requested

Large empty box for additional notes or details.

The items reported to be in the packages were inventoried and documented above by a representative from the submitting agency. At the time of analysis, the assigned analyst/examiner will unseal the package and verify the inventory. In the event of a discrepancy between the actual inventory and that reported on this form, reconciliation shall be conducted in accordance with the Massachusetts State Police Crime Laboratory (MSPCL) Evidence Handling and Submission Manual.

I, [Signature] #3907, Received By (Signature)

, acknowledge receipt of the item(s) above from Trooper Andrew K. Zeller #3907. Printed or typed rank & name of Delivered By

01/24/2022 Date

CSSS - Boston Department / Agency (of Delivered By)

[Signature] Signature of Delivered By

COPY

Handwritten initials