EVIDENCE SUBMISSION FORM (ESF)



The Commonwealth of Massachusetts
Department of State Police Crime Laboratory (MSPCL)
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) 946-104
Springfield Evidence Unit: (413) 205-1837 Fax: (413) 205-1838

22-01586-7

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Type of Case: Homicide Date of Incident: 1/23/22									i / / '>	
Investigating Agency: Middles ex-SPDU Investigating Agency Case #: 2022-110-0147										
Incident Address: / Baron Park Lh Incident Town: Burlington										
Report	to (Name): Francis Tori	-05	Te	1. #: 7 8	/8976600 Email:					
	Victim/Other's Name(s)	DOB	Sex	Race	Suspect's Name	(s)	DOB	Sex	Race	
V ™ O□	Courtemanche, Paul	Th TA	M	W	SSN #					
V□ O□					SSN#					
V□ O□					SSN#		_			
List each item of evidence separately with a brief description.				(Li	Recovery Location st Owner's Name or Location Found)	FIS, GSR, To	Analysis Requested: (Arson, CRIM, CSSS, DNA, FIS, GSR, Tox, Tox OUI w/blood, Trace, etc.) / Special Requests			
1 Tube of blood				Cour	rtemanche, Paul	,	CR	IM	/	
2										
3										
4										
5										
6										
7										
8										
9										
9 10 11										
11										
12 // //										
package Police (respons include	ns reported to be in the packages were inventoried and verify the inventory. In the event of a discrep rime Laboratory (MSPCI) Evidence Handling an itible for conducting by tests according to standard p sending an item(s) to another laboratory for analyst be given to the agency. Received By (Signature)	ancy between the d Submission M rocedures, and w sis. All procedura	e actual invitanual. The who author author all deviation	ventory and to e undersigned izes the MSF ns shall be de	that reported on this form, reconciliation shed submits this evidence on behalf of the in PCL to make all decisions regarding scientic ocumented in the laboratory notes according to the item(s) above from	all be conducted in a nvestigating agency, fically necessary de	who acknowled with who acknowled with the second se	the Massa edges that the aid procedu e of each s	chusetts Stathe MSPCL res. This mauch deviatio	
1-31-22 MSP MIC				delles	מוז ע		ANSI.	-		
	Date of Submission	Departi	gency (of D	envered By)	Signature of	Denvered By	f			

IF THE STATUS OF THIS CASE CHANGES, PLEASE NOTIFY THE CASE MANAGEMENT UNIT AT 978-451-3440.

WHITE (Lab, Page 1 of 4)
Massachusetts State Police Crime Laboratory
Evidence Submission Form

Issue Date: July 19, 2017

Evidence Submission Form Issued By: Deputy Director Forensic Biology YELLOW (DA, Page 2 of 4)

PINK (Evidence, Page 3 of 4)

GOLD (Deliverer, Page 4 of 4) ECU-F008-v12.0