## Case Exhibits Submission Form (CESF)

Name & Rank of IO:			
Mobile No.	Email:		
Forwarding Authority:			
Postal Address:			
Pin Code:	District:	State:	
Mobile No.	Email:		
P.S.	Case No.	Dated:	
U/S:			
A. History of the Case			

## B. List of the Case Exhibits forwarded for Forensic Examination

<b>Description of Exhibits</b>	No. of Parcel	How, when and by whom found	Source of Exhibits	Remarks
		· ·		
	Description of Exhibits			

## C. Nature of Forensic Examination Required

1.		
2.		
3.		
4.		

Specimen Seal Impressions in Sealing Wax (covered with Cello tape)

Signature of Investigating Officer

Ref. Letter/Memo No. Date:

## **Authorization Certificate**

	Certified	that	the	Director,	Central	Forensic	Science	Laboratory	y, DFS	S, N	ИНА,
Govern	nment of	India,	Urp	ut village,	Urput-K	umeria Ro	ad, Distr	ict Kamrup	, Assan	n, ha	is the
authori	authority to examine the Case Exhibits of P.S.:										
Case I	No.:	•••••					Dat	e <b>d:</b>			
U/S:			•••••		•••••					•••••	
								and	d also	to	take
portion	ns thereof o	or take	ther	n to pieces	for the p	urpose of e	examinatio	on.			

Signature, Designation & Stamp of the Forwarding Authority