



ORANGEBURG COUNTY SCHOOL DISTRICT

CHAIN OF CUSTODY / EVIDENCE FORM

TIME	DATE OF OFFENSE	SCHOOL			
INCIDENT TYPE					
VICTIM INFORMATION					
NAME (LAST, FIRST, MIDDLE)	DATE OF BIRTH	RACE	SEX	HEIGHT	WEIGHT
SUSPECT INFORMATION					
NAME (LAST, FIRST, MIDDLE)	DATE OF BIRTH	RACE	SEX	HEIGHT	WEIGHT
EVIDENCE SUBMITTED					
ITEM#	DESCRIPTION				
SUBMITTING PERSONNEL					
REQUESTING PERSONNEL (PRINT NAME)			REQUESTING OFFICER (SIGNATURE)		
CHAIN OF CUSTODY					
ITEM#	REASON	RECEIVED FROM	DATE	TIME	