

# GSR Case Processing Form

## COUNTY OF LOS ANGELES - DEPARTMENT OF MEDICAL EXAMINER-CORONER

1104 N. MISSION RD., LOS ANGELES, CALIFORNIA 90033  
PHONE: 323-343-0503 EMAIL: LACGSR@CORONER.LACOUNTY.GOV

Case#:  
Agency:  
Contact Person:  
Telephone:  
Email :

Date Submitted:  
Due Date:  
No. of 2 sample kits:  
LACDOC# of  
Related Cases:

### Billing Info

Attention to:  
Agency:  
Address:

Telephone:  
Email:

### Evidence Return

Attention to:  
Address:

Telephone:  
Email :

### Package your evidence along with this form and send to:

1104 N. Mission Rd.  
Los Angeles, CA 90033  
Attention: Debra Gibson, Samantha Ingalls, or Melvina Gin

### Special Instructions:

**By submitting evidence to this laboratory, you are agreeing to:**

- Testing of GSR kits samples by Scanning Electron Microscopy/ Energy Dispersive X-Ray Spectroscopy (SEM/EDS).
- Testing of two samples per kit initially, unless otherwise specified:
  - for hands, this will be the backs.
  - for kits collected from other items, this will be the two samples with the most probative value according to the supplied information.
- Submitted clothing or other items survey sampled utilizing a single stub per item of packaging unless otherwise directed.
- Testing according to procedures/methods maintained by this laboratory, which are available for review upon request.

LACDOC#:

For office use only: This tender has been received and reviewed by \_\_\_\_\_ on \_\_\_\_/\_\_\_\_/\_\_\_\_.  
Accepted \_\_\_\_\_ Rejected Reason rejected: