

**Charlotte-Mecklenburg Police Department
 Crime Laboratory-Chemistry Section
 Single Item Controlled Substances Worksheet**

Complaint Number:	Chemist:
Lab Number:	Date Started:
	Date Completed:

Evidence was received in a Sealed Envelope Sealed Paper Bag Sealed Box Other _____

Item:	
Item Description	
Weight _____	Gross Weight: Net Weight: UOM: ± _____ Residue: <input type="checkbox"/>
Color Test lot# Result # of tests <input type="checkbox"/> Mod. Co(SCN) ₂ _____ <input type="checkbox"/> Marquis _____ <input type="checkbox"/> Other _____	Microscopic # _____ Hairs: <input type="checkbox"/> Cystolithic <input type="checkbox"/> Glandular <input type="checkbox"/> Covering/Simple <input type="checkbox"/> Seeds <input type="checkbox"/> Resinous Material <input type="checkbox"/> Other: _____
Sample Prep	<input type="checkbox"/> Methanol – lot: _____ <input type="checkbox"/> Chloroform - lot: _____ <input type="checkbox"/> NH ₄ OH - lot: _____ <input type="checkbox"/> Other – name/lot: _____ <input type="checkbox"/> Rinsed
Instrumental Analysis	<input type="checkbox"/> GC-MS: _____ # _____ <input type="checkbox"/> FTIR/ATR: _____ # _____
Notes	
Sample after analysis	<input type="checkbox"/> Consumed <input type="checkbox"/> Repackaged <input type="checkbox"/> Other: _____
Results	Hours Worked: