
Firearms Reference Collection Receipt Cover Sheet

NORTH CAROLINA STATE CRIME LABORATORY
121 East Tryon Road, Raleigh, NC 27603
919-582-8700

The undersigned acknowledges **RECEIPT** of the following weapon(s) **for use** in the Firearms Reference Collection of the North Carolina State Crime Laboratory (Physical Evidence Section – Firearms Unit) **or for destruction** by the North Carolina State Crime Laboratory.

FR Number(s) Assigned: _____

Submitting Agency: _____

Sub. Agency Representative: (Print) _____ (Signature) _____

Examiner/FSM: (Print) _____ (Signature) _____

Date of Receipt: _____