



NORTHEASTERN ILLINOIS REGIONAL CRIME LABORATORY

GUN DESTRUCTION INVENTORY

AGENCY _____

Gun Destruction Number	Department Case Number	Make/Model of Gun	Serial Number	R	D

Firearms will be **destroyed without test firing** at the discretion of the examiner.

Prepared By: _____ ID#: _____ Date: _____ Time: _____
Verified By: _____ ID#: _____ Date: _____ Time: _____
Delivered By: _____ ID#: _____ Date: _____ Time: _____

-----FOR LABORATORY USE ONLY-----

Received By: _____ Date: _____ Time: _____
Destroyed By: _____ Date: _____ Time: _____
Witnessed By: _____ Date: _____ Time: _____

Original copy will have received by signed in blue ink