



Handedness R - L

Clothes

No other injuries observed or complained of  Time of injury  Time of photographs

**Samples taken:**

.../1-	at	h	.../4-	at	h	.../7-	at	h
.../2-	at	h	.../5-	at	h	.../8-	at	h
.../3-	at	h	.../6-	at	h	.../9-	at	h

**Additional samples:**.....

**Given to.....at.....h**

I consent\* to a full examination and/or taking of samples and/or taking of photographs for educational purposes including publication in scientific & medical journals, books and all other media including electronic and am aware that formal reports/statements may be prepared from these notes for police, court and other purposes, and I consent to such reports/statements being made: \* delete as appropriate

Name .....

Signed .....

Witness (name and signature) .....