



REVIEWER CASE CHECKLIST

Chicago Police Department
Records Division-Latent Print Unit-177

R.D. NO.

DATE

REPORT NO.

NO.	ACTION	MARK COMPLETE
1.	Ensure the Requesting Unit & District Correspond. [District 022>Requesting Unit 620]	<input type="checkbox"/> YES <input type="checkbox"/> DNA
2.	Ensure if a Suspect is Manually compared and the result is Negative , that the suspect name listed in the Manual Section corresponds to the information listed on the Suspect exemplar. Ensure the exemplar used in the comparison is included in the case jacket.	<input type="checkbox"/> YES <input type="checkbox"/> DNA
3.	Ensure an AFIS Candidate List is included in case jacket. If an AFIS Hit, check list for correct IR and/or SID and finger number.	<input type="checkbox"/> YES <input type="checkbox"/> DNA
4.	Ensure the name is recorded in the Subject Identification Section as it appears on the exemplar. Include middle initial, if applicable.	<input type="checkbox"/> YES <input type="checkbox"/> DNA
5.	Ensure the name recorded in the Elimination Section is the same as it appears on the Inventoried elimination card standard. If there is a discrepancy, then ensure the discrepancy is addressed in the Latent Examiner Comments Section .	<input type="checkbox"/> YES <input type="checkbox"/> DNA
6.	Ensure that a corresponding IR number is listed in the Subject Identification Section for AFIS SID Hits if available. [The SID & IR card must be compared to the latent evidence & included in the case jacket].	<input type="checkbox"/> YES <input type="checkbox"/> DNA
7.	Ensure that the Finger Number/Palm Location on the FP Physical Lifts & Digital Photo printouts are Marked with a felt tip marker for Identifications .	<input type="checkbox"/> YES <input type="checkbox"/> DNA
8.	Ensure the the Primary Examiner & the Verifier mark their initials next to or adjacent to the identified finger/palm impression. Ensure at a minimum that the Subject IR/SID Number, Date & Name is marked. Examiners will mark initial & subsequent re-examinations of identified impressions, [i.e., in-custody and confirmatory comparisons] on the respective exemplars with their initials and date.	<input type="checkbox"/> YES <input type="checkbox"/> DNA
9.	Ensure that the Finger Number/Palm Location is recorded in the case notes section and correspond to the identifiers marked on the FP Lifts & Digital Photos.	<input type="checkbox"/> YES <input type="checkbox"/> DNA
10.	Ensure that Photographic Copies and/or Charted Enlargements of initial latent impressions identified to each Subject [non-elimination identifications] are enlarged and plotted out by the initial examiner.	<input type="checkbox"/> YES <input type="checkbox"/> DNA
11.	Ensure that a unique identifier is recorded next to the IR/SID number in the Case Notes Section for Subject Identifications. [CB for IR numbers and TCN for SID numbers, Cook County Inmate Number and/or date printed for Confirmatory comparisons, if available, etc.]	<input type="checkbox"/> YES <input type="checkbox"/> DNA
12.	Ensure all relevant information is included in the Latent Examiner Comments Section . The key is can the end user of the report [ASA, AUSA, Detective Division] understand what was examined and what was previously done referenced to a specific R.D. number. Ensure addendum information is included if applicable.	<input type="checkbox"/> YES <input type="checkbox"/> DNA

REVIEWER'S NAME (PRINT)

STAR NO.

REVIEWER'S SIGNATURE