

## Forensic Testing Checklist for TASER® Conducted Energy Weapons



Subject
Age/Size of Subject:
☐ Evidence of Drug use or Excited Delirium
☐ Body core temperature at time of death (if applicable)
Other relevant details of incident (clothing, #applications, subject's reactions, etc.):
(attach summary if needed)
TASER
Model: $\square$ M26 $\square$ M18L $\square$ M18 $\square$ X26 $\square$ X26C
Number of TASER Air Cartridges fired in incident? ☐One ☐Two ☐Three ☐ Mor
☐ Batteries used in incident (submit to lab)
Type  Alkaline Brand:
☐ NiMH Date/Time last charged?
□ DPM
☐ Unit Data download printout included with clock time?
☐ Unit Data download requested?
Known problems with unit:
Cartridge Serial Number: Collected from:
☐ Wires and probes attached?
☐ AFID tags collected?
Probes
Collected from: □ PHOTOS of location and spread of probes



