**DRAKE REGIONAL CRIME LABORATORY**

***Drake RCL USE ONLY*Laboratory Case Number**

**Evidence Sealed : Y \_\_\_\_ N \_\_\_\_** *If NO Sealed by:*

**Date Evidence Rec’d: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Huntsville Tx, TX**

**Laboratory Submission Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Agency Case Number** |  | | |
| **Offense** |  | | |
| **Date of Offense** |  | | |
| **County of Offense** |  | | |
| **Agency** |  | | |
| **Case Contact Person** |  | | |
| **Name** |  | **Title** |  |
| **Street Address** |  | **Phone/Fax** |  |
| **City, State, Zip Code** |  | **Email** |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Suspect** | **Victim** | **Name (Last, First Middle)** | **Race** | **Sex** | **DOB** | **DL#/SSN#/ID#** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |

**Description of Evidence Submitted**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Exhibit#** | **Number of Items** | **Description of Evidence** | **Origin** | **Exam Requested** |
| **1.** |  |  |  |  |  |
| **2.** |  |  |  |  |  |
| **3.** |  |  |  |  |  |
| **4.** |  |  |  |  |  |
| **5.** |  |  |  |  |  |
| **6.** |  |  |  |  |  |

**For some non-drug cases, it may be appropriate to attach a copy of the offense report.**

**Please include brief case synopsis, unusual examination(s) requested, and/or relevant case priority information.**

Have any of these exhibits been previously analyzed by a laboratory? Yes No

If yes, list numbers

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