

 State Police	Crime Laboratory Evidence Submission		Agency:	
			Incident #	Lab Case # (If Known)

LAB USE ONLY - Bar Code Label	*LAB USE ONLY*	Method of Transmittal
	In Person	
	Cert/Reg Mail	
	Fed Ex/UPS	
	Other	

Investigating/Case Officer (Case Agent/Person Managing Investigation)

Name (Last, First, MI)		Rank
Office #	Cell #	Email

Submitting Officer (Officer Delivering Evidence to Lab, if Different than Case Officer)

Name (Last, First, MI)	Rank	Email	Agency

Incident Details (Specific Facts of the Case - Use LAB-2A for Additional People Involved)

Offense Date (mm/dd/yyyy)	County of Occurrence	CTV (City/Town/Village)	Type of Offense (Burglary, Murder, Rape, etc.)
Name (Last, First, MI)		Title (Specify: Complainant/Deceased/Def/Subject/Suspect/Victim/Other)	

Description of Events (Specific details of incident):

Priority Status (Case Status at Time of Evidence Submission - Send Status Updates to: FICCMR@troopers.ny.gov)

Pending	Grand Jury	Trial	Court Date:
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Evidence (Use LAB-2A for Additional Items)

Agency Item #	Item Description (Include source if applicable, i.e. victim, suspect, owner)	Specific Analysis Requested (DNA/Serology, Drugs (ID/Weight), Tox, Latents, Firearms (NIBIN, S/N, Test Fire), Trace Section (Fire Debris, Forensic Unknown, Fracture Match), CCU, Audio/Video/Image, Odontology)

 Is there a different *INCIDENT* to which this submission should be compared? If Yes, provide Incident or Lab #

****CUSTOMER AGREEMENT****

By submission of this form and the evidence described above, the submitting agency acknowledges any analytical reports issued by the NYSP Crime Laboratory will be formatted in accordance with the Laboratory's standard procedures and contain all information necessary for the interpretation of test results.

 Go to <https://troopers.ny.gov/laboratory-test-report-information> for identification of the reporting information required by ISO/IEC17025:2017 that might not appear in the test report.