 State Police	DNA/Serology Submissions	Agency:	Station: (NYSP)
		SJS/Case #	Lab Case #

Instructions:

- Complete this form in addition to the LAB-2/GENL-2 Lab Submission form for DNA/Serology evidence.
- This form must be completed electronically; use drop down fields where applicable.

Investigating Officer/Case Manager (Name of individual to receive laboratory testing results.)

Title and Name	Office #	Agency/ Work Cell #	Email

Priority Status (Specify date(s), if known. Dates are used to prioritize laboratory testing when possible.)

Pending Investigation	Grand Jury	Date:	Arraignment Date:
Trial	Other	Date:	Specify:


Subjects Involved

Name (Last, First, MI)	Title (Victim, Suspect, etc.)	DOB (mm/dd/yyyy)

Details of Offense (Description of event including where event occurred i.e., victim's residence, suspect's car, etc., relationship of the evidence to the case, and location of evidence collection.)

Reference Samples (A known DNA sample collected directly from a person, aka 'elimination' sample. Typically, this is a swab to collect cells from inside the mouth/cheek area referred to as a 'buccal' swabbing.)

Item # (samples submitted as DNA controls)	Name (Last, First, MI)	Designation of Subject(s) in this Case

 State Police	<h2 style="margin:0;">DNA/Serology Submissions</h2>	Agency:	Station: (NYSP)
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Sexual Offense Evidence Submissions

Executive Law § 838-a requires police and prosecutorial agencies to submit Sexual Offense Evidence Collection Kits (SOECK) within ten (10) days of receiving the kit.

1. Is the evidence item being submitted a SOECK?	Yes, answer #2.	No, skip to #3.
2. If no charges have been or will be filed, answer the following questions:		
a. Did the victim file a false complaint?	Yes No	Unk (Pending Investigation)
b. Did the Agency determine no crime occurred?	Yes No	Unk (Pending Investigation)
c. For a kit collected as part of a routine post-mortem exam, is there reason to believe a sexual assault occurred?	Yes No	Unk (Pending Investigation) N/A

Mandatory for all DNA Submissions

3a. Did the victim have consensual sex within five (5) days prior to or after the assault? <i>**If yes, secure an elimination DNA buccal sample from any consensual partners.**</i>	Yes	No	Unk
b. If yes, has a consensual partner reference sample been obtained?	Yes	No	Unable to obtain
c. If no/unable to obtain, provide Consensual Partner name(s):			

Firearms (With a charge of Criminal Possession of a Weapon)

Instructions:

- For all firearms submissions meeting the below Criminal Possession of a Weapon case criteria, limit submission to a maximum of **three (3) swabs from the handgun** (grip, trigger/trigger guard, slide, or magazine) or **four (4) swabs from the long gun** (grip, trigger/trigger guard, fore-end/forearm or handguard, bolt handle/lever/cheek plate, or an area that would be handled frequently by the user.)
- If latent processing/firearms examination is needed, the biology section will process up to two (2) firearms for DNA analysis, swabbing the areas described above.

Latent print examination can be performed by a trained Crime Scene Technician (CST) wearing proper "Personal Protective Equipment" prior to swabbing for DNA. If you need assistance, please contact the Senior Investigator in charge of the State Police Forensic Investigation Unit (FIU) in your local Troop at FICCMR@troopers.ny.gov.

The Biological Science Section does not accept testing for:

- firearms removed from an individual's person (where the only charge is CPW)
- found firearms **NOT** believed to be associated with a crime

1. If the firearm was not acquired as indicated above, identify the circumstances of the firearms seizure (e.g. seized as part of a search warrant, seized during a traffic stop, etc.):

2. Where was the firearm located/recovered from?

a. If along flight path, was suspect observed discarding the firearm by LEO?	Yes	No
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3. Is the charge of Criminal Possession of a Weapon the only charge in this case?	Yes	No
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a. If no, list all charges (needed to determine CODIS eligibility):

4. Did any uncharged, known individual(s) handle the firearm submitted?	Yes	*Reference sample should be provided with this submission.*	No
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5. Are there multiple firearms?	Yes, list Make/Model: No	Make	Model
Note: Swabs from a maximum of two (2) firearms can be submitted as described in the Firearms Instructions.			

6. Is there any additional lab testing requested (e.g. latent processing, firearms examination, etc.)?	Yes, list below.	No
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Additional Information		
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Has other EVIDENCE pertaining to this case been previously submitted?	Yes, provide Lab Case #	No
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Is there a previous CASE submission that this case should be compared to?	Yes, complete below.	No
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Lab Case #:	Victim(s) Name:
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Remarks/Comments (Other offense(s) committed, additional localities, etc.):

Additional names of suspects, defendants, victims, deceased, or other information:

Submitted by	
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Name (Last, First, MI)	Date (mm/dd/yyyy)

The Biological Science Section will return items without analysis if the laboratory has attempted to contact the submitter on two occasions (with no response) to obtain additional case specific information or request the necessary reference samples.

Please submit the completed form with the LAB-2/GENL-2 Lab Submission form at the time of evidence submission.

If a Lab Case # already exists, you may forward the completed form to:
evidence@troopers.ny.gov or fax: (518) 402-2757.