

## Request for Laboratory Examination

If evidence has been previously submitted to the laboratory on this incident, please indicate the **Laboratory Number**:

| Agency Details   |                           |                                    |     |   |                   |
|--|---------------------------|------------------------------------|-----|---|-------------------|
| Agency Name  |                           | Agency Incident Number             |     | File Class  |                   |
| Submitting Officer (Name and Rank)   |                           | Submitting Officer Phone Number    |     | Submitting Officer Email  |                   |
| Investigating Officer (Name and Rank)  |                           | Investigating Officer Phone Number |     | Investigating Officer Email   |                   |
| Carbon Copy Officer Name or Email  |                           |                                    |     |   |                   |
| Offense Details  |                           |                                    |     |   |                   |
| Date of Offense  | Two Digit County Code     | City                               |     | State   | Zip Code          |
| Examination Details  |                           |                                    |     |   |                   |
| NOTE: The Forensic Science Division (FSD) shall select and use the most appropriate testing method procedure(s). |                           |                                    |     |   |                   |
| <b>Forensic Exams:</b> <i>Please itemize evidence on page two for Biology/DNA exam requests</i>                  |                           |                                    |     |   |                   |
| Biology/DNA  | Bloodstain Pattern        | Latent Prints                      |     | Questioned Documents  |                   |
| <b>Seized Drugs Exams:</b>   |                           | <b>Marihuana Analysis:</b>         |     | <b>Trace Evidence Exams (Select all that apply):</b>                              |                   |
| Overdose   |                           | Above 2.5 oz                       |     | Paint   |                   |
| Possession   |                           | Under 21                           |     | Vehicle Make/Model  |                   |
| Manufacture/PWID   |                           | Correctional Facility              |     | Glass   |                   |
| Other  |                           | School                             |     | Fiber   |                   |
|  |                           | Other:                             |     | Physical Fit  |                   |
|  |                           |                                    |     | Fabric Damage   |                   |
|  |                           |                                    |     | Chemical - Poison/Adulterant  |                   |
|  |                           |                                    |     | Chemical - Unknown  |                   |
|  |                           |                                    |     | Chemical - Other  |                   |
|  |                           |                                    |     | Impressions - Footwear Comparison   |                   |
|  |                           |                                    |     | Impressions - Footwear Make/Model   |                   |
|  |                           |                                    |     | Impressions - Tire Track Comparison   |                   |
|  |                           |                                    |     | Impressions - Tire Track Make/Model   |                   |
|  |                           |                                    |     | Impressions - Fabric/Other  |                   |
|  |                           |                                    |     | Fire Debris/Ignitable Liquid  |                   |
|  |                           |                                    |     | Explosives  |                   |
|  |                           |                                    |     | Miscellaneous   |                   |
|  |                           |                                    |     | Collection & Documentation  |                   |
|  |                           |                                    |     | Other:  |                   |
|  |                           |                                    |     | <i>Please itemize evidence on page two when requesting any examination above.</i> |                   |
| Person Detail (Type Key: S = Suspect, V = Victim, E = Elimination)   |                           |                                    |     |   |                   |
| Type   | Name: First, Middle, Last | Latent Print Comparison Needed     | Sex | Date of Birth   | SID or FBI Number |
|  |                           |                                    |     |   |                   |
|  |                           |                                    |     |   |                   |
|  |                           |                                    |     |   |                   |
|  |                           |                                    |     |   |                   |
|  |                           |                                    |     |   |                   |
| Statement of Facts/Details (Required)  |                           |                                    |     |   |                   |
|  |                           |                                    |     |   |                   |

Pre-Trial Date: \_\_\_\_\_, or Trial Date (if known)

**IMPORTANT - PLEASE NOTE THE FOLLOWING REGARDING EVIDENCE PACKAGING AND DELIVERY:**

1. All evidence must be properly packaged and sealed in appropriate containers to prevent contamination and tampering.
2. Potential hazards shall be clearly identified by labeling the container. Examples: biohazard, sharp, laceration, caustic or any other known or potentially hazardous material.
3. FSD reserves the right to transfer evidence in its laboratory system to another accredited laboratory to help facilitate examination of evidence.

If evidence has been previously submitted to the laboratory on this incident, please indicate the **Laboratory Number**:

The following information is REQUIRED per Federal regulations, when a Biology or DNA examination is requested, to enable the Michigan State Police to accurately assess whether a DNA profile obtained from an evidentiary sample can be entered into the Combined DNA Index System (CODIS):

- Where the item was collected (i.e. location)?
- To whom does the item allegedly belong?
- Why do you believe this item belongs to the perpetrator and NOT a victim or unrelated individual?

The information should be included in the DETAILS column below, along with a brief description for each item of evidence.

Items submitted for Trace Evidence examination should, at a minimum, contain the identity and specific location of collection (e.g. known carpet fibers from suspect's vehicle).

*By submitting evidence to the laboratory, FSD reserves the right to consume biological evidence and/or items of evidence when necessary to complete any and all analysis unless instructed not to do so in the DESCRIPTION/DETAILS OF ITEM column below.*

| Item of Evidence | Description/Detail of Item |
|------------------|----------------------------|
|                  |                            |
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By requesting services (Crime Scene Response or Forensic Testing) of FSD, you agree to the following:

All MSP FSD laboratory reports will be issued in a simplified format. Additional information will be made available to our customers upon request. This information may include the location of any testing if different from the listed laboratory, date of issue (release) for the report, the contact information of the customer for all reports and the Investigating Officer for toxicology reports, the specific dates of performance of any laboratory testing activities, a highly detailed description of the evidence item(s) and/or their condition, evidence disposition, identification of test methods used (where not provided by policy), dates of sampling (if applicable), reference to the sampling plan and sampling method used by the laboratory or other bodies where these are relevant to the validity or application of the results, additions/deviations/exclusions from methods, specific test and environmental conditions, and any other activity or report parameters that may be of interest.

For additional information about simplified reporting, please visit the MSP FSD Website at:

<https://www.michigan.gov/en/msp/divisions/forensic-science>.

If additional items of evidence need to be listed in a single laboratory submission please use copies of FSD-007, Page 2 for itemizing.