



OKLAHOMA STATE BUREAU OF INVESTIGATION
REQUEST FOR LABORATORY EXAMINATION

Requesting Officer: \_\_\_\_\_ Badge #: \_\_\_\_\_ Agency/Troop: \_\_\_\_\_
(TYPE/PRINT - OFFICER'S NAME)
Requesting Officer's e-mail: \_\_\_\_\_ Phone No: \_\_\_\_\_

Submitting Officer: (Person delivering evidence to the OSBI Laboratory/Facility) Evidence Delivered: [ ] In Person [ ] By Mail [ ] Evidence Locker

(TYPE / PRINT - OFFICER'S NAME & BADGE #) (OFFICER'S SIGNATURE)\* (AGENCY/TROOP)

Requesting Agency Case #: \_\_\_\_\_
Type of Offense: \_\_\_\_\_
County of Offense: \_\_\_\_\_
Date of Offense: \_\_\_\_\_
Court Date, If Known: \_\_\_\_\_

OSBI Laboratory Number

Has evidence been previously submitted on this case? [ ] Yes [ ] No
If yes, please provide the OSBI Lab #: \_\_\_\_\_

SUBJECT/SUSPECT(S):

Table with 6 columns: NAME (Last, First Middle), Race, Sex, DOB, SSN, DNA Known Submitted?\*\*. Rows for multiple subjects with checkboxes for YES/NO.

\*\*For Biology cases: if knows are not submitted, please attach a signed statement describing what steps have been taken to obtain knows.

VICTIM(S):

Table with 5 columns: NAME (Last, First Middle), Race, Sex, DOB, DNA Known Submitted?\*\*. Rows for multiple victims with checkboxes for YES/NO.

EVIDENCE SUBMITTED:

Table with 3 columns: Itemized Description of Evidence (Attach additional pages if necessary), Type of Exam Requested\*\*\* (per item), Biohazard? Y/N. Rows for multiple items with checkboxes for YES/NO.

\*\*\*For all Biology/DNA/CODIS requests: An officer statement or police report is required.

\*\*\* For all firearm submissions, has the weapon been unloaded? [ ] Yes [ ] No Officer's initials indicating
Has the evidence previously been entered into IBIS/NIBIN? [ ] Yes [ ] No weapon is unloaded

SEND A COPY OF REPORT TO: (include address)

Copy of report to DA's OFFICE:

[ ] Yes [ ] No

\*Upon submission of evidence to the OSBI Laboratory for examination, the requesting officer certifies with his/her signature:

I am aware of and consent to the terms outlined in the OSBI CSD Notice to Stakeholders (OSBI CSD QMA 1.1).

I understand evidence may be subjected to methods which are destructive and may damage the evidence.