



LABORATORY SUBMISSION FORM INSTRUCTIONS (LAB-06)

General Instructions

1. The Laboratory Submission form (LAB-06) serves as a contract between the submitting agency and the DPS Crime Lab. It must be filled out as thoroughly as possible.
2. The form is available in a Word document and as a PDF document.
3. If you choose to use the Word document to complete the form, please note the following:
 - a. The Individual section will accommodate additional individuals by entering a tab in the last cell of the table.
 - b. The Description of Evidence section will accommodate additional evidence by entering a tab in the last cell of the table.
 - c. Some cells on the form will expand to accommodate additional text.
4. Do not write or type inside the box marked "DPS Laboratory Use Only".
5. Attach a brief synopsis/offense report for all cases except for drug or blood alcohol cases.
6. If a blood alcohol or toxicology exam is needed, use the DPS kit to collect the evidence and submit with a Toxicology/Blood Alcohol Laboratory Submission Form.
7. All DNA cases MUST include a victim.
8. If any evidence is being RESUBMITTED, please submit the evidence being resubmitted as a separate Laboratory Submission.

Submission Type

Check only one of the three submission types:

New: The first submission request for this case to any DPS laboratory.

Additional: A subsequent submission request for this case. (other evidence had been previously submitted to a DPS laboratory)

Resubmission: The evidence had been previously submitted for analysis, returned to the agency, and is being resubmitted for additional testing.

- o Please check **Corrected Copy** if the submission information has been corrected.

Agency/Offense Information

Agency: The name of the submitting agency

Agency Case #: The complete agency case number

- o Please do not include any punctuation.
- o Please indicate if multiple agency case numbers are associated with this case.

Offense: The type of offense

- o Please indicate if multiple offenses are associated with this case.



Offense Date: The date of offense

Offense County: The county of offense

- Please indicate if multiple offense counties are associated with this case.

Case Contact Person Information

Title/Full Name: Full name of the person requesting the analysis

- Please do not use abbreviations.

Badge Number: The badge or ID number of the person requesting the analysis

Physical Address, City/State/Zip: The physical street address of the agency

Phone: The phone number of the person requesting the analysis

Fax: The fax number of the person requesting the analysis

Email: The email of the individual responsible for the laboratory request

- Only secure and valid agency email addresses, such as those ending in .gov or .edu, may be used. DPS will not send reports to public domain email addresses such as gmail, yahoo, or from other internet providers.
- If a secure or valid email address is not available, one may be established at <http://www.leo.gov/>

Individual Information

S/V/E: Indicate whether the individual is a suspect (S), victim (V), or an elimination (E)

Name: The individual name [LAST, FIRST, MIDDLE (if known)]

- If the Submission Type is Additional or Resubmission, please indicate any new individuals (not included on original submission form) with an asterisk (*)

Sex: The sex of the individual (M – Male; F – Female; U – Unknown)

Race: The race of the individual (W – White/Caucasian/Hispanic; B – Black/African American; A – Asian/Pacific Islander; O – Other)

DOB: The date of birth (if known)

State: The state that issued the individual's driver license/ID

Driver License #: The driver license number issued by the state

State ID #: The ID number issued by the state

Description of Evidence Submitted

Agency Item #: The agency item number associated with the evidence

of items: The total number of evidence items (Examples: number of pills, bundles, cartridge cases, swabs, etc.)

Description of Evidence: Brief description of the evidence (Example: white round tablets, swab of blood, latent print from window, etc.)

- Please indicate if the items were collected as probable cause.

Source: The source from where the evidence was collected. Examples: suspect's pocket, broken window at point of entry, victim's living room



Type of Exam(s) Requested: The type of examination(s) to be performed

- Examples of Common Laboratory Request/Service and/or Type of Examination:

Drug Analysis

Destruction Only

DNA (see PEH-02-04A for criteria for submission)

Trace Analysis

- Fibers

- Paint

- Hair

- Physical Match/Comparison

- Adhesive Tape Analysis

- Shoeprint Impressions

- Tireprint Impressions

- Lamp Filament

- Glass

- Unknown Substances (non-drugs)

Gunshot Residue/GSR (see PEH-02-05A for submission requirements of SEM GSR stubs)

Firearms

Distance Determination (see PEH-02-09 for additional information)

NIBIN

Toolmarks

Serial Number Restoration

Questioned Documents

Computer Forensic (see PEH-02-08A and PEH-02-08B for lab requirements for computer search warrant and submission)

Video Examination

Blood Alcohol (Refer to the Toxicology Laboratory Submission form, LAB-12 and Toxicology Collection Kit)

Toxicology (Refer to the Toxicology Laboratory Submission form, LAB-12 and Toxicology Collection Kit)

- Additional specific laboratory requests can be considered and should be clearly communicated and agreed to with the laboratory.



Physical Evidence Handbook
Laboratory Submission Form Instructions

DRN: PEH-01-05
Version: 00

Preparer

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Date: 07/01/2013

Concurrence

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Date: 07/01/2013

Version #	Effective Date	Brief Description of Change(s)
00	07/01/2013	Original Issue

[07/01/2013]

The most current copy of The Physical Evidence Handbook is available at:
<http://www.txdps.state.tx.us>