



TEXAS DEPARTMENT OF PUBLIC SAFETY  
CRIME LABORATORY

**Controlled Substances Destruction Only  
Submission Form**

LAB-06B Rev.00 (06/2018) p.1 Issued by: QAC

- New Submission For Destruction       Corrected Copy  
 Additional Submission for Destruction

Lab Case # (if known) \_\_\_\_\_

Agency \_\_\_\_\_

Agency Case # \_\_\_\_\_

Offense 18D – None – Destruction Only

Offense Date \_\_\_\_\_

Offense County \_\_\_\_\_

- Drop Box     Mail/Certified     Other \_\_\_\_\_

Printed Name \_\_\_\_\_ Agency \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*DPS Laboratory Use Only*

DPS Lab Case #/Date Evidence Received

**Case Contact Person Information**

Title/Full Name \_\_\_\_\_ Badge Number \_\_\_\_\_

Physical Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Email \_\_\_\_\_

**Individual (S=Suspect, V=Victim)**

S / V	Name (Last, First, Middle)	Race	Sex	DOB	State	Driver License #	ID Card #

**Description of Evidence Submitted**

Agency Item #	Evidence Type and Description	Source	Weight	Quantity	LAB USE ONLY	
					Weight	Quantity
	<input type="checkbox"/> Powder <input type="checkbox"/> Tablet(s) <input type="checkbox"/> Capsule(s) <input type="checkbox"/> Liquid <input type="checkbox"/> Plant(s) <input type="checkbox"/> Paraphernalia <input type="checkbox"/> Edible(s) Description:					
	<input type="checkbox"/> Powder <input type="checkbox"/> Tablet(s) <input type="checkbox"/> Capsule(s) <input type="checkbox"/> Liquid <input type="checkbox"/> Plant(s) <input type="checkbox"/> Paraphernalia <input type="checkbox"/> Edible(s) Description:					
	<input type="checkbox"/> Powder <input type="checkbox"/> Tablet(s) <input type="checkbox"/> Capsule(s) <input type="checkbox"/> Liquid <input type="checkbox"/> Plant(s) <input type="checkbox"/> Paraphernalia <input type="checkbox"/> Edible(s) Description:					
	<input type="checkbox"/> Powder <input type="checkbox"/> Tablet(s) <input type="checkbox"/> Capsule(s) <input type="checkbox"/> Liquid <input type="checkbox"/> Plant(s) <input type="checkbox"/> Paraphernalia <input type="checkbox"/> Edible(s) Description:					
	<input type="checkbox"/> Powder <input type="checkbox"/> Tablet(s) <input type="checkbox"/> Capsule(s) <input type="checkbox"/> Liquid <input type="checkbox"/> Plant(s) <input type="checkbox"/> Paraphernalia <input type="checkbox"/> Edible(s) Description:					

Evidence Condition:  Dried     Undried (Wet)

Note: All weights must include packaging, estimate large quantities using weight

**DESTRUCTION ONLY – DESTRUCTION ONLY – DESTRUCTION ONLY – DESTRUCTION ONLY – DESTRUCTION ONLY**