



TEXAS DEPARTMENT OF PUBLIC SAFETY
CRIME LABORATORY

Sexual Assault Evidence Submission Certification Form

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Agency Case Number _____ Agency _____

Case Status *(select one)*

Please provide the status of the case at the time of submission. If status changes in the future, please contact the laboratory to request an update.

- Priority:** Analysis information is needed due to an imminent threat to public safety, the case is highly publicized in the community, the case has a set court date, or the court has specifically requested analysis information
- Active:** Analysis information is needed to further an active investigation with no set court date
- Statutory:** Analysis information is needed to satisfy the statute

This form is requested to meet the requirements set forth in Government Code Title 4 Subtitle B Chapter 420 Subchapter B-1 § 420.042 which requires a person who submits sexual assault evidence to a public accredited crime laboratory under this chapter or other law to provide the following signed, written certification:

This evidence is being submitted by _____
(printed name of submitter)
in connection with a criminal investigation.

Submitter Signature _____

For DPS Crime Laboratory Use Only: