

Jefferson County Sheriff's Department

LAB USE ONLY
Submission Date

Regional Crime Laboratory
 (409) 726-2577 Fax (409) 726-2576
 5030 Hwy 69 South, Suite 500 Beaumont, TX 77705
BIOLOGY EVIDENCE
LABORATORY SUBMISSION

LAB USE ONLY
Laboratory No.

S/V/E	NAME (Last, First Middle)	RACE	SEX	DOB

OFFENSE _____

COUNTY OF OFFENSE _____ **OFFENSE DATE** _____

AGENCY _____ **AGENCY CASE NO.** _____

SEIZING OFFICER _____ **TRANSPORTING OFFICER** _____

ADDRESS _____

PHONE NO. _____ **EXT** _____

PRINT _____

SIGN _____

LAB USE ONLY	DESCRIPTION	SOURCE/LOCATION	EXAM(S) REQUESTED

Exam(s) Requested: Blood, Latent/DNA, Forwarding Only (buccal swabs, trace evidence) **Additional Evidence**

LAB USE ONLY			
<input type="checkbox"/>	Plastic bag(s)	<input type="checkbox"/>	Envelope(s)
<input type="checkbox"/>	Paper bag(s)	<input type="checkbox"/>	_____
<input type="checkbox"/>	Total item(s)	Sealed: N Y	Received by: _____