



OKLAHOMA STATE BUREAU OF INVESTIGATION
REQUEST FOR LABORATORY EXAMINATION

Requesting Officer: _____ Badge # _____ Agency/Troop: _____
(TYPE / PRINT - OFFICER'S NAME)

Requesting Officer's Email: _____ Phone No: _____

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

(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 Number _____

SUBJECT/SUSPECT(S):

Table with 6 columns: Last Name, First Name, Middle Name, Sex, Race, DOB, SSN, Check if Knowns Submitted* (DNA, Fingerprint, Palm Print)

*For Biology and Print cases, if knowns have not been submitted, please attach a signed statement describing what steps have been taken to obtain knowns.

VICTIM(S):

Table with 5 columns: Last Name, First Name, Middle Name, Sex, Race, DOB, Check if Knowns Submitted (DNA, Fingerprint, Palm Print)

EVIDENCE SUBMITTED:

Table with 2 columns: Itemized Description of Evidence (Attach additional pages if necessary), Type of Exam Requested** (per item)

**For all Biology/DNA/CODIS requests, an officer statement or police report is required.

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 agrees to the following terms:

The OSBI shall select and use the most appropriate testing method and procedure.
Evidence may be subject to methods which are destructive and may damage the evidence.