

DATE/TIME STAMP

Georgia Bureau of Investigation
Division of Forensic Sciences

EVIDENCE SUBMISSION FORM

DOFS USE ONLY

Received by: _____

Date/Time: _____

DOFS Case #: _____

INCIDENT REPORT MUST BE SUBMITTED ON BIOLOGY AND TRACE EVIDENCE CASES
Evidence improperly packaged/sealed/labeled will result in a significant delay

PLEASE PRINT LEGIBLY

I. Submitting Agency _____ Agency Case # _____
County of Incident _____ Date of Incident _____

II. **Is Subject/Victim a juvenile (under 17)?** YES NO **Is Subject/Victim deceased?** YES NO

VICTIM: _____ Age: _____ Race: _____ Sex: _____
Last Name First Name Middle GA-SID/FBI

SUBJECT: _____ Age: _____ Race: _____ Sex: _____
Last Name First Name Middle GA-SID/FBI

SUBJECT: _____ Age: _____ Race: _____ Sex: _____
Last Name First Name Middle GA-SID/FBI

Use supplemental page for additional names/information

III.

Case Officer: _____ Officer Badge # _____
Last Name First Name

FAX #/Email Address: _____ Phone # _____ Pager # _____
Note: Provide Agency fax # if no email address

Other Agency to Access Lab Report _____ GSP Post #/GBI Reg. #/Precinct _____

IV. (Indicate all that are appropriate)

Type of Case: Death VGCSA DUI Burglary Armed Robbery Arson
 Assault Sexual Assault Hit & Run MVA/driver MVA/passenger
 MVA/pedestrian Fire or CO Other _____

Manner of Death: Homicide Suicide Accidental Natural Undetermined

Delayed death? Yes No Suspected: drugs poisons (list) _____

Cause of Death: _____

Brief Description of Item(s) Submitted Examination(s) Requested Re-Sub. (X) Brief Case History

Brief Description of Item(s) Submitted	Examination(s) Requested	Re-Sub. (X)	Brief Case History

V. Please answer the following questions for Trace and/or Serology/DNA analyses.

Refer to service menu for conditions/restrictions for requested services and analyses.

TRACE EVIDENCE ANALYSIS: (Incident Report Req'd.)

Is perpetrator known to frequent scene?
How often? _____

SEROLOGY/DNA ANALYSIS: (Incident Report Req'd)

Who was bleeding? Subject Victim other _____

Did victim receive blood transfusion? _____

Has victim had sexual relations within the last 3 days? _____

Did perpetrator use a condom? _____

Did ejaculation occur outside the body? _____

GENERAL INFORMATION

Refer to DOFS Laboratory Services & Requirements for Submitting Evidence manual for complete conditions/restrictions for services and analyses.

1. Evidence container contents are not verified at the time of receipt.
2. Do not seal Submission Form inside package with evidence.
3. Ensure all evidence is properly labeled, packaged, sealed and initialed (extending over tape to package) before submitting to lab.
4. Submit a copy of the incident report on Biology and Trace Evidence cases.
5. Approved Blood Alcohol or Urine Collection kits have their own Submission Forms.

PROPER SEAL

Evidence packaging must be either heat-sealed or sealed with tamper-proof evidence tape along with the sealing officer/agent's initials across the seal.

PROPER LABEL

Last name, first name of victim/subject and Agency name and case number on each evidence item.

PROPER PACKAGING

Refer to DOFS Laboratory Services & Requirements for Submitting Evidence manual.

SEROLOGY/DNA ANALYSIS - (INCIDENT REPORT REQUIRED)

If DNA is a request, all known samples must be submitted in purple stoppered tube or buccal swab. All evidence should be air-dried and packaged in paper bag.

LATENT FINGERPRINTS

Latent prints will be registered to the AFIS unsolved latent database only if elimination prints are submitted. GA SID or FBI number must be provided in order to facilitate finding the victim/subject(s)' known exemplars.

DRUG IDENTIFICATION

One item per case will be analyzed.

Quantitative analysis of cocaine shall be performed on trafficking cases.

Double bag in clear plastic bags.

Clan lab evidence must be packaged as per requirements and inspected prior to submission.

TRACE EVIDENCE ANALYSIS - (INCIDENT REPORT REQUIRED)

REMEMBER: Hair and fiber evidence must be collected and preserved in the lab (from clothing & linens) before other examinations are performed. You must request hair and/or fiber examinations at the time of evidence submission. These Trace Evidence examinations cannot be performed after items have been opened for examination by other sections of the lab (i.e., Serology/DNA).

For items that have a request for DNA analysis in addition to the request for Trace Evidence examinations (hair, fiber, paint, glass, etc.), the Trace Evidence examinations will not be immediately performed. If the results of the DNA examinations do not address the appropriate aspects of your case, please contact the Trace Evidence Section Manager to arrange for the completion of the Trace Evidence examinations.

QUESTIONED DOCUMENT SERVICES

Only three checks per case will be examined.

Only original checks should be submitted.

Misdemeanor bad check cases will not be examined.

INSTRUCTIONS TO COMPLETE FORM

Auto date stamp this form in box located on top left corner

- I. Self-explanatory
- II. **Names on reports will be printed exactly as on Submission Form. No name changes will be made from original submission information. Be sure name(s) and spellings are accurate.**
 - A. Indicate if subject or victim is a juvenile (under age of 17) **and** if the subject or victim is deceased.
 - B. Victim/Subject: Print last name, then first name, then middle name/initial.
 - C. Print Victim/Subject's age, sex & race.
 - D. Add victim/subject SID or FBI number to Latent Print cases.
- III.
 - A. Case Officer to receive report: print name clearly - last name, then first name. Please include Officer's last (4) digits of SSN as a unique identifier for our records.
 - B. Add email address or agency fax #, phone number and pager number in order to contact for any needed clarifications.
 - C. Indicate GSP Post No. or GBI Region No. if applicable.
 - D. Other Agency to access lab report if applicable.
- IV.
 - A. Type of Case, Manner and Cause of Death: self-explanatory. Be sure to indicate if homicide or death case.
 - B. Brief Description of Item Submitted/Brief Case History: self explanatory.
 - C. Examination(s) Requested: See the DOFS Laboratory Services & Requirements for Submitting Evidence manual for explanation of services available.
- V. Answer applicable questions depending upon service requested.