

# REQUEST FOR LABORATORY EXAMINATION -- INSTRUCTIONS

## WSP CRIME LABORATORY LOCATIONS

### WSP – Kennewick Crime Laboratory

143302 E Law Ln  
Kennewick WA 99337  
(509) 734-5820  
FAX (509) 734-5848

### WSP – Olympia Laboratory

3310 Capitol Boulevard  
PO Box 42608  
Olympia WA 98504-2608  
(360) 596-4525  
FAX (360) 596-4470

### WSP – Marysville Crime Laboratory

2700 116th St NE Ste P  
Tulalip WA 98271-9425  
(360) 654-1201  
FAX (360) 654-1213

### WSP – Seattle Crime Laboratory

2203 Airport Way S Ste 250  
Seattle WA 98134  
(206) 262-6020  
FAX (206) 262-6033

### WSP – Spokane Crime Laboratory

580 W 7<sup>th</sup> St  
Cheney WA 99004  
(509) 625-5401  
FAX (509) 625-5440

### WSP – Tacoma Crime Laboratory

2502 112th St E Room 273  
Tacoma WA 98445-5104  
(253) 538-3207  
FAX (253) 538-3275

### **CLD Crime Scene Response Team**

(253) 255-3064

### WSP – Vancouver Crime Laboratory

1401 Kauffman Ave  
Vancouver WA 98660  
(360) 993-3800  
FAX (360) 993-3899

### WSP - High Tech Crime Unit

210 11th Ave SW Ste 402  
Olympia WA 98501  
(360) 704-4242  
FAX (360) 704-2973

## INSTRUCTIONS FOR USE

If you have any questions regarding the use of this form, the proper submittal of evidence, or the types of examinations possible, please call the laboratory serving your area. **Please type and complete the form electronically.**

When submitting evidence, clearly identify the agency case number and item number on each evidence package and use these exact numbers on the form.

If DNA evidence is submitted, please complete the [DNA Case Supplemental Information form](#) (required for first-time submissions only) and the [Authorization for Consumption of DNA Evidence form](#) (as applicable). For additional information, please reference the [Forensic Services Guide](#).

If Explosives evidence is submitted please complete the “Explosives Safety and Evidence Checklist” at this link: [http://www.wsp.wa.gov/forensics/docs/crimelab/safety\\_checklist.pdf](http://www.wsp.wa.gov/forensics/docs/crimelab/safety_checklist.pdf)

PRIMARY AGENCY CASE NUMBER (ACN): Enter the number your agency uses to track the case.

RELATED AGENCY CASE NUMBER: Enter any related agency case number(s). Use the “SPECIAL INSTRUCTIONS” space to explain relationship or record additional ACNs.

INVESTIGATIVE OFFICER/DETECTIVE: The primary investigator or person listed as the agency representative on the analytical report and to whom the report will normally be delivered. If the report should be delivered to another person, describe delivery instructions in the “SPECIAL INSTRUCTIONS” section.

EVIDENCE ITEM #: The individual tracking number your agency uses to identify the item. This number must match the number on the evidence item.

ITEM DESCRIPTION: Brief description of each item. Examples are “packet of white powder,” “fired cartridge case,” and “blue jeans from John Doe.”

EXAM CODES: This is a guide for possible types of examinations and consists of a letter designation for the general type or functional area of examination requested. These codes are listed below.

NOTE: If the general type for the examination you are requesting is unknown or unlisted, use “OTH” (for other) and fill in the examination you need under “SPECIAL INSTRUCTIONS.”

SPECIAL INSTRUCTIONS: List the specific examination you are requesting. “EXAM CODES” for some common requests are listed below. This section can also be used to convey information that would be pertinent to the examination requested.

SUBMITTED BY: This is filled in by the agency representative who personally delivers or ships the evidence to the laboratory.

**“/S/” followed by your name denotes an electronic signature (or add your digital signature).**

<u>EXAM CODES</u>	<u>COMMON EXAMINATIONS</u> (for use in SPECIAL INSTRUCTIONS)	<u>EXAM CODES</u>	<u>COMMON EXAMINATIONS</u> (for use in SPECIAL INSTRUCTIONS)	<u>EXAM CODES</u>	<u>COMMON EXAMINATIONS</u> (for use in SPECIAL INSTRUCTIONS)
CHE	<u>Chemical Analysis</u> Chemical unknown analysis Explosive analysis Fire debris analysis Metal analysis Solid incendiary analysis Toxic substance analysis	DNA	<u>DNA</u> Body fluid identification DNA typing Species Determination	MIC	<u>Microanalysis</u> Damage assessment Fiber comparison Headlamps Hair screening Physical match Paint and polymer comparison Soil comparison Shoe/tire comparison Tape examination
CLA	<u>Clandestine Laboratory Analysis</u> Clandestine drug analysis Determination of synthesis route Precursor analysis	F/T	<u>Firearm &amp; Toolmark Examination</u> Bullet comparison Cartridge case comparison Firing distance determination NIBIN Serial number restoration Toolmark comparison	OTH	<u>Other</u>
CON	<u>Controlled Substance Analysis</u> Controlled drug analysis	LAT	<u>Latent Print Examination</u> ABIS search NGI (FBI database) search Latent print processing Latent print comparison	QD	<u>Questioned Document Examination</u> Altered document analysis Handwriting comparison Indented writing examination Typewriter/printer/copier comparison
CSRT	<u>Crime Scene Response</u> Bloodstain pattern analysis Crime scene reconstruction Evidence recovery				

# WASHINGTON STATE PATROL – CRIME LABORATORY REQUEST FOR LABORATORY EXAMINATION

For evidence submission guidelines, refer to the  
[Forensic Services Guide](#)

CRIME LAB BAR CODE HERE  
FOR LAB USE ONLY

PRIMARY AGENCY CASE NUMBER	RELATED AGENCY CASE NUMBER(S)
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HAS OTHER EVIDENCE IN THIS CASE BEEN PREVIOUSLY SUBMITTED TO A WSP CRIME LAB? <input type="checkbox"/> YES <input type="checkbox"/> NO	OFFENSE	DATE OF OFFENSE
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SUSPECT(S) – LAST, FIRST, MI (SID #, if available)	DOB	VICTIM(S) – LAST, FIRST, MI <small>ALSO USE THIS SPACE FOR ELIMINATION PRINTS</small>	DOB
1		1	
2		2	
3		3	
4		4	

INVESTIGATING OFFICER/DETECTIVE (Can be different from submitter)	<input type="checkbox"/> RUSH	COURT DATE
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NAME (TYPE OR PRINT) (LAST NAME, FIRST NAME)	RANK/POSITION	BADGE #	E-MAIL ADDRESSES	PHONE
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AGENCY	STREET ADDRESS	CITY	ZIP CODE
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UNIQUE EVIDENCE ITEM # (Prioritized)	ITEM DESCRIPTION	EXAM CODES	SPECIAL INSTRUCTIONS
			<b>For DNA:</b> <ul style="list-style-type: none"> <li>Please submit <a href="#">Supplemental form</a> on initial submission and <a href="#">Consumption form</a> as needed.</li> <li><b>Sexual Assault Submissions:</b> Priority will be given to active investigations and cases with impending court dates. Is DNA analysis important for continuing the investigation? Yes <input type="checkbox"/> No <input type="checkbox"/></li> </ul> The Crime Lab will assume "No" if neither box is checked.

EVIDENCE SUBMITTED BY: (PRINT—LAST NAME, FIRST NAME)	SIGNATURE (/S/ Electronic Signature)	DATE	TIME
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SUBMITTAL METHOD:	TRACKING NUMBER:
	TRACKING NUMBER:

## FOR LAB USE ONLY

RECEIVED BY: (PRINT NAME—LAST NAME, FIRST NAME)	SIGNATURE	DATE	TIME
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Evidence Item(s)	TRANSFERRED BY	TO	VIA	DATE-TIME	RECEIVED BY	DATE-TIME
				-		-
	TRACKING NO:					
				-		-
	TRACKING NO:					
				-		-
	TRACKING NO:					

Item(s) being released/returned:			
RELEASED BY: PRINT NAME—Last Name, First Name	SIGNATURE	DATE	TIME
RELEASED TO: (PRINT NAME—Last Name, First Name (or CARRIER)	SIGNATURE (or TRACKING NUMBER)	DATE	TIME