



EVIDENCE SUBMISSION FORM

Miami Valley Regional Crime Laboratory
361 W. Third Street, Dayton, OH 45402 Ph. 937-225-4990

LAB USE ONLY

Additional Information/Evidence

Agency Case # _____

Victim: _____

Subject/Suspects: _____

Item #	Agency Tag #	Description of Evidence	Analysis Requested (see codes below)

Detailed Case History:

The submitted evidence will be examined and analyzed in accordance with established laboratory sampling plans and capabilities, utilizing validated methods and instrumentation. Method deviations will be utilized as necessary. As needed, laboratory personnel will contact the submitting agency to clarify requests or obtain additional information to assist in the analysis. Unless otherwise requested, the final report for this case will be shared with any attorney associated with any criminal or civil proceedings regarding this case.