NEBRASKA STATE PATROL CRIME LABORATORY EVIDENCE SUBMITTAL FORM

| Nebraska State Patrol Cr 3977 Air Park Road Lincoln, NE 68524 Ph: (402) 471-8950 Fax: (402) 471-8954 | | | | Laboratory | Locatio Date: Lab# | | R LABORATOF | RY USE ONLY | |
|--|-------------------|----------------------------|--------------------------------|--|--------------------------|---|----------------------|----------------------|---------------------|
| INVESTIGATIV | | | BADGE | # | PHONE # | | EMAIL ADDRESS | | |
| AGENCY | | | ADDRE | SS | | | CITY, STATE ZIP CODE | | CODE |
| SUPERVISOR (| CONTACT | | BADGE | # | PHONE # | PHONE # EI | | | |
| NAME | | ADDITIC AGENCY | ONAL RE | NAL REPORTS TO BE SENT TO ANY I Address (| | O ANY INDIVIDUAL OR AGENCY DDRESS (Street / City / Zip Code) | | | |
| NAME | | AGENCY | | | ADDRESS | (Street / City / Zip | Code) | | |
| SUSPECTED O | FFENSE | | | CASE INF DATE OF OFFENSE | | N | AGENCY CASE # | NS | P TROOP AREA |
| VIC / SUS / OT | гн | NAME (Please inclu | ude any ki | nown aliases) | | SEX | DOB | SID# / | BI# |
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| | | | | | | | | | |
| FOR BIOLOGY | SAMPLES | IS IT OKAY TO CONSUM | IE SAMPI | .ES? 🗌 YES, CO | NSUME SAMF | PLES IF NEEDED | D PLEASE COI | NTACT ME BEFORE CONS | UMING SAMPLES |
| IS THIS AN ADDITIONAL NO, FIRST SUBMITTAL OR RE-SUBMITTAL? | | YES, ADDITIONAL SUBMISSION | | | IF 'YES', PLEAS | E PROVIDE ANALYST'S N | AME IF KNOWN: | | |
| SUBMITTAL OR RE-SUBMITTAL? SUBMISSION | | | YES, RE-SUBMISSION OF ITEM(S): | | |) | | | |
| SENT TO ANO | THER LABORATORY F | OR TESTING? | | EVIDENCE | | 201 | | | |
| | BACK BY CERTIFIED |) MAIL | [| | | | N 2 WEEKS OF NOT | TIFICATION | |
| | | | | NVENTORY OF E | /IDENCE SU | JBMITTED | | | DECUDANTED |
| ITEM # | | | DESC | RIPTION | | | EXAMINAT | ION(S) REQUESTED | RESUBMITTED ITEM |
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Submission of evidence relinquishes all decisions regarding analytical processing and choices of methods to the NSP Crime Laboratory. The Laboratory shall have discretion over the selection of testing methods, the totality of the analysis, and the items tested. You can find the most current version of this form and how-to videos at https://statepatrol.nebraska.gov/divisions/



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Location: Date: Lab#

INVENTORY OF EVIDENCE SUBMITTED (Continued) EXAMINATION(S) RESUBMITTED ITEM # DESCRIPTION ITEM REQUESTED \square

----- FOR LABORATORY USE ONLY ------

| CHAIN OF CUSTODY | | | | | |
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| DATE | TIME | RELEASED BY | BADGE # | AGENCY | |
| RELEASED TO | | AGENCY | | REGISTERED CERTIFIED MAIL # | |

| DATE | TIME | RELEASED BY | | AGENCY | | |
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| DATE | TIME | RELEASED BY | BADGE # | AGENCY |
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