DNA EVIDENCE INFORMATION SHEET

OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION
SFN59915 (05/2011)

2641 East Main Avenue,P.O. Box 937
Bismarck, ND 58502-0937
Telephone: 701-328-6159
Fax: 701-328-6185

Submitting Agency		Investigating Officer/Contact
Telephone Number	E-Mail Address	Agency Case Number
Crime Laboratory Case Number	Subject	Victim
Level of Offense: ☐ Felony ☐ Misdemeanor		

Brief Case Synopsis and Analysis Requested

Items Submitted and Evidence Description

1.

What is the Investigative Value of this Evidence?

2.

What is the Investigative Value of this Evidence?

3.

What is the Investigative Value of this Evidence?

Was subject known(s) buccal/blood sample submitted? ☐ Yes ☐ No
If no, submit known at earliest convenient opportunity, if applicable.

Was victim(s) known(s) buccal/blood sample submitted? ☐ Yes ☐ No
If no, submit known at earliest convenient opportunity, if applicable.

Were other pertinent knowns submitted? (i.e. consensual sex partner, elimination subject)? ☐ Yes ☐ No
If no, submit known at earliest convenient opportunity, if applicable.

Is additional evidence of investigative value available for analysis? ☐ Yes ☐ No