VERMONT DEPARTMENT OF PUBLIC SAFETY FORENSIC LABORATORY REQUEST FOR LABORATORY EXAMINATION

P. O. Box 47, Waterbury, VT 05676-0047 Phone: 802-244-8788

DPS Form 305A (Please Print)

Agency Case #_____

Evidence # Evidence Description	Evidence Context	Requested Analysis
(ex: quantity, brief description)	(ex: location seized)	Code
		(see below)
		+
		+
Requested Analysis Codes:		
AFIS: AFIS SR: Serology	•	DD: Distance Determination
LP: Latent Prints DNA: DNA		SN: Serial Number Restoration
DA: Drug Analysis TX: Toxicology	FT: Function Test	TM: Toolmark Comparison
FRDB: Fire Debris		