



Integrated Forensic Laboratories
ANSWERS NOW

Non-DNA Forensic Evidence Submission

IFL Lab # (To be filled out by IFL): _____

In order to process your forensic casework, this form must be filled out and send along with the evidence. Prior to submitting a case, please call Customer Service at 866-BODE-4-ID (866-263-3443).

Submitting Agency: _____ Date: _____

Name: _____ Phone Number: _____

Date of Offense: _____ Offense Location: _____

Offense #: _____ Suspect(s): _____

Offense _____ Victim(s): _____

Authorized Point(s) of Contact:

Name: _____

Agency: _____

Title: _____

Phone Number: _____

Fax Number: _____

Cell Phone: _____

Email Address: _____

Name: _____

Agency: _____

Title: _____

Phone Number: _____

Fax Number: _____

Cell Phone: _____

Email Address: _____

Mailing Address (where the report should be sent):

Name: _____

Agency: _____

Address: _____

City/State/Zip _____

Phone Number: _____

Fax Number: _____

Email Address: _____

Billing Address:

Name: _____

Agency: _____

Address: _____

City/State/Zip _____

Phone Number: _____

Fax Number: _____

Email Address: _____

Purchase Order #: _____

Evidence Return Address:

Name: _____

Agency: _____

Address: _____

City/State/Zip _____

Phone Number: _____

Fax Number: _____

Email Address: _____

