

**REGIONAL FORENSIC SCIENCE CENTER**  
**SEDGWICK COUNTY, KANSAS**  
 1109 N. Minneapolis Wichita, Kansas 67214  
**LABORATORY EXAMINATION REQUEST**

<b>Request Date</b>	<b>Suspect Name(s) and DOB</b>	Date Rec'd _____																								
<b>Agency Case Number</b>		Lab Number _____																								
<b>Offense Date</b>		<b>Charges Pending (select one)</b>																								
<b>Agency Contact Information</b>	<b>Victim Name(s) and DOB</b>	Federal      State      City																								
Name: _____ Address: _____		<b>Court Date (if known)</b>																								
Investigator's Name(s): _____ Phone: _____ Email: _____	<b>Case Classification (select all that apply)</b> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td>Aggravated-Assault</td> <td>Aggravated-Battery</td> <td>Aggravated-Burglary</td> <td>Aggravated-Robbery</td> <td>Arson</td> <td>Attempted-Murder</td> </tr> <tr> <td>Auto Theft</td> <td>Burglary</td> <td>DFSA</td> <td>Drug</td> <td>DUI/DUID</td> <td>Homicide</td> </tr> <tr> <td>Larceny</td> <td>Open-Container</td> <td>Pathology-Identification</td> <td>Robbery</td> <td>Sex Crime</td> <td>Vehicular-Homicide</td> </tr> <tr> <td>Weapons</td> <td colspan="5">Other</td> </tr> </table>		Aggravated-Assault	Aggravated-Battery	Aggravated-Burglary	Aggravated-Robbery	Arson	Attempted-Murder	Auto Theft	Burglary	DFSA	Drug	DUI/DUID	Homicide	Larceny	Open-Container	Pathology-Identification	Robbery	Sex Crime	Vehicular-Homicide	Weapons	Other				
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Item No.	Examination Requested

**Remarks / Case Information**