

Expedited Request Information

Department/Agency: _____

Department Case #: _____ FC Case #: _____

Department Contact: _____ Phone Number: _____

Where to send Final Report (Email or Fax): _____

Date Requested: _____ Date Needed: _____

Purpose: _____

Court Information

Circle one and Specify Date:

Bail Hearing / Probation Violation / Indictment Deadline / Trial Date / Investigation

Date: _____ County/Courthouse: _____

Field Test Conducted (Yes or No) _____

Defendant Held W/O Bail (Yes or No) _____

Lab Approval

Approved: _____ Declined: _____

Notes: _____

Supervisor (or designee): _____ Date: _____
(Signature)

Note: Testing should be completed within 30 days of request. Lab staff will contact you when testing is complete. If we are unable to complete the case in 30 days, lab staff will contact you with an update. For questions, call 401-222-5567.