

## Durham Police Department Forensic Services Division Request for Forensic Services Issuing Authority: Ver

Document ID: FSD-9

FSD Manager

Version: 090114



IR #:	Incident Type:				Date of			f request:	
Requestor name:			Offic	Officer ADA			Contact phone #:		
☐ Latent Print Processing ☐ Latent Print Comparison ☐ Firearms Examination									
☐ Crime Scene Photo CD ☐ Video Retrieval/Analysis ☐ Digital Forensics Exam (cell phone, computer, etc.)									
Subject Name					DOB:			SID # (required for comparison)	
Items to be examined									
Item #:	Descri	iption:							
Special Instructions/requests:									
FSD use only									
Date Received: Assigned				ned to	:			Date:	
Notes/comments:									
Any request for scientific examination submitted to the Forensic Services Division will be analyzed employing standard testing methods as specified within the individual discipline protocols.  Page of									

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