CONTROLLED SUBSTANCE
Evidence Submission Form

BCA Minnesota
Bureau of Criminal Apprehension

FSS-F-EI-1004

Issue Date: 06/04/2025

☐ **New Case**
☐ **Additional** BCA Lab Case# _____
☐ **Resubmission** BCA Lab Case# _____

1430 Maryland Ave E
St. Paul, MN 55106
Phone: 651-793-2900
Fax: 651-793-2901

3700 N Norris Ct NW
Bemidji, MN 56601
Phone: 218-755-6600
Fax: 218-755-6623

101 11th Ave N
St. Cloud, MN 56303
Phone: 320-249-2689
Fax: 651-793-2901

Website: bca.dps.mn.gov
Email: bca.lab.vault@state.mn.us

Complete pages 1 and 2

County of Offense	Date of Offense	Jury Trial Date	Court File Number
Investigating Agency		**Submitting Agency**	
Investigating Officer's Name		**Submitted by**	
Investigating Officer's Direct Phone & Email Address		**Additional Agencies Involved**	
Investigating Agency Case / ICR #		**Location of Offense**	
Prosecutor's Name and Contact Information			

Associated Individuals (S = Suspect, V = Victim, E = Elimination, O = Other/Owner)

	S/V/E/O	Name (Last, First, Middle)	Sex	DOB (MM/DD/YYYY)	SID/FBI Number
1					
2					
3					
4					
5					
6					

Description of Evidence

Agency Item#	Brief Description and Recovery Location	Individual Associated (use above numbers)	Requested Analysis (use below codes)	Additional Information (e.g. Fed. quant, suspected fentanyl, etc.)

Brief Summary of Case and Special Circumstances

Requested Analysis Codes

DNA: DNA
DRG: Drug Chemistry
FA: Firearms
LP: Latent Prints

Minnesota Bureau of Criminal Apprehension
Forensic Science Services

Website: bca.dps.mn.gov
Email: bca.lab.vault@state.mn.us

Investigating Agency
Agency Case #

CHECK THE SECTIONS THAT CORRESPOND TO REQUESTED ANALYSES ON PAGE 1 AND ANSWER ALL ASSOCIATED QUESTIONS

☐ **Drug Evidence** (DRG)

Was there possession of a firearm? ☐ **Yes**   ☐ **No**

Does the associated individual have a previous drug conviction? ☐ **Yes**   ☐ **No**

Charge(s): ☐ Possession ☐ Possession with intent to sell ☐ Sale

Are there special circumstances regarding this case (e.g. child endangerment, assault, etc.)? ☐ **Yes** ☐ **No**

　　　If Yes, explain: _____

Was a presumptive field test performed? ☐ **Yes** ☐ **No** If Yes, indicate test result: _____

Any known hazards (e.g. body cavity search, body carry, etc.)? ☐ **Yes** ☐ **No** If Yes, describe: _____

Are any items associated with a possible drug facilitated sexual assault? ☐ **Yes** ☐ **No**

　　　If yes, list suspected drug(s): _____

☐ **DNA and/or Latent Prints** (DNA, LP)

Has the evidence been previously processed for latent prints? ☐ **Yes** ☐ **No**

Are images of processed prints being provided? ☐ **Yes** ☐ **No**

Are known DNA samples and/or prints available from all principals? ☐ **Yes** ☐ **No** If No, will they be provided? ☐ **Yes** ☐ **No**

　Note: DNA samples collected from convicted offenders for inclusion in the DNA database CANNOT be used as evidence specimens.

　Note: Known prints for law enforcement are NOT kept on file.

If evidence is being examined for prints in blood, is there a question as to the source of the blood? ☐ **Yes** ☐ **No**

☐ **Firearms/Toolmarks (FA/TM)**

☐ Firearms Identification (comparison of fired ammunition components)
☐ Fired Evidence (brand, caliber determination)
☐ Function
　☐ Malfunction ☐ Full-Auto ☐ Basic Function

☐ Length Measurements (barrel/overall – shotguns & rifles)
☐ Distance Determination (muzzle-to-target)
☐ Bullet Hole/Impact Determination (no firearm available)

Select all that apply to the firearm:
Yes No
☐　☐ Is DNA swabbing needed?
☐　☐ Is LP needed?
☐　☐ Is NIBIN (MN firearms database) needed? ☐ Additional states (list if needed):_____
☐　☐ Is Serial Number Restoration needed?

☐ **Toolmark Examination** (Tool must be linked to an individual through investigation or forensic testing.)