

**Complete this form and place inside the mailing box. Kits can be hand delivered or mailed to the  
BCA Forensic Laboratory – see page 2**

Keep a copy of this form for your files. Required fields indicated with “\*”.

Name and Location of submitting Medical Facility *		Track-Kit Barcode Number* <small>If Patient name is not provided, this unique number will be needed if the kit is to be converted to Unrestricted for testing purposes.</small>
City, State of Incident*	County of Incident *	Date Kit Collected *
Patient Name		Patient Date of Birth
Law Enforcement Agency (if applicable)		Law Enforcement ICR or Property #
Blood Kit # (as applicable)*		Urine Kit # (as applicable) *
<small>If submitting blood kit for storage, enter # above. Indicate N/A if no blood kit is being submitted.</small>		<small>If submitting a urine kit for storage, enter # above. Indicate N/A if no urine kit is being submitted.</small>

**If the Restricted Kit(s) is being transported to the BCA by the law enforcement agency, the kit(s) must be clearly marked as Restricted to ensure proper barcoding and receipt.**

Once the kit(s) is (are) received by the BCA Forensic Laboratory, a copy of this submission form will be returned to the medical facility personnel or law enforcement officer designated below. The completed form will have the unique barcode number(s) assigned to the SAECK and Toxicology Kits (if submitted). Please keep a copy of this form in the event the patient would like the kit tested in the future (conversion to Unrestricted status).

\*Name \_\_\_\_\_

\*Address \_\_\_\_\_

\*Phone # \_\_\_\_\_

\*Email Address \_\_\_\_\_

BCA LABORATORY USE ONLY:		
Date/Time Received	Lab Personnel Signature	Kit(s) sealed? Yes      No
Barcode(s)		

## **RESTRICTED KIT SUBMISSION INSTRUCTIONS**

**Kits can be mailed by USPS or delivery/courier service to the following address:**

ATTN: RESTRICTED KIT STORAGE  
MN Bureau of Criminal Apprehension  
Forensic Science Services  
1430 Maryland Ave. E.  
St. Paul, MN 55106

**Kits can be delivered in person at the following locations:**

ST. PAUL LOCATION  
MN Bureau of Criminal Apprehension  
1430 Maryland Ave. E.  
St. Paul, MN 55106  
EVIDENCE INTAKE (not the Public Entrance)

BEMIDJI LOCATION  
MN Bureau of Criminal Apprehension  
3700 N. Norris Ct. NW  
Bemidji, MN 56601

ST. CLOUD LOCATION – WEDNESDAYS 9-3PM ONLY  
MN Bureau of Criminal Apprehension  
St. Cloud Police Department  
101 11<sup>th</sup> Ave. N  
St. Cloud, MN 56303  
\*\*Please call ahead\*\*  
Phone: 320-249-2689