

# Arkansas State Crime Laboratory



*Guidelines for the Packaging and  
Submission of Evidence*

# A Few Numbers

- ❑ The ASCL receives approximately 30,000 cases each year
- ❑ We currently have over 10,000 pieces of evidence in Secure Storage.
- ❑ Evidence Receiving performs an inventory twice a year
- ❑ The ASCL works with over 450 agencies: federal, county, city, and state

# Goals of Evidence Packaging

- ❑ To protect personal from possible hazards:
  - Firearms
  - Edged Weapons (knives, razors, etc.)
  - Biohazards
  
- ❑ To protect evidence against:
  - Loss
  - Contamination
  - Cross-transfer
    - Suspect to victim
    - Victim to suspect
    - Scene to scene
    - Item to item
  - Deterioration
  
- ❑ To facilitate evidence transfer to the different sections of the laboratory



# Evidence Preparation

- ❑ Some evidence needs to be prepared before packaging
  - Certain types of evidence may need to be dried before they can be packaged:
    - Wet biological samples
    - Fresh plant material
    - Envelopes and/or boxes are optimal for damp items.
  - They will mold if not dried
- ❑ Syringes **MUST** be packaged in a puncture-proof container



# Do Not Send Field Test Kits

Leaking Field Test Kits can:

- ❑ Cause damage to evidence
- ❑ Be a hazard to anyone handling them



# Approved Evidence Containers

## Envelopes

- Must measure between 5×7” and 10×15”.

## Paper sacks: please place inside a box

- Must have ample room for the evidence to be repackaged once removed.

# Unacceptable Evidence Containers



- ❑ Containers that have been previously submitted to the ASCL
  - Cross-contamination
  - Confusion for the analysts and for you in court
- ❑ Suitcases, duffle bags, backpacks, knap sacks, pillow cases, garbage bags, gun cases or other similar containers
- ❑ Evidence containers that will not allow the evidence to easily go back into the container (such as neatly packed paper bags of clothes)
  - Make sure the size and shape of the container are appropriate or adjust it to fit your needs
  - If you have questions please call us

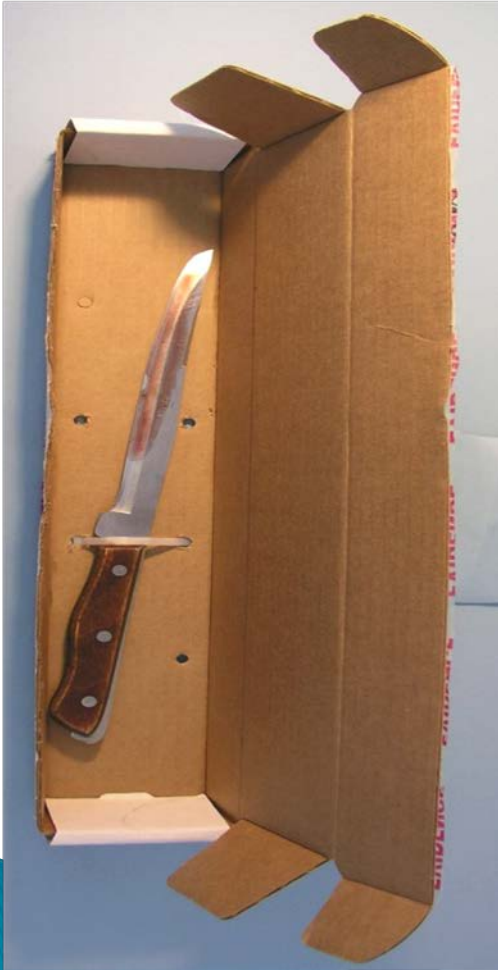
# Boxes

- ❑ Boxes should weigh no more than 25 lbs
- ❑ Leave a small amount of room for evidence expansion
- ❑ Use an appropriate sized box for the evidence item you are packaging
- ❑ Contents need to be listed on one side of the box (e.g. E1–10)
- ❑ Please leave one side of box for our barcode





# Properly Packaged Knife



- ❑ Cardboard box will:
  - Immobilize the knife to protect laboratory personnel
  - Protect the blood sample on the knife for analysis
  - Fixed blade knives or folding knives that are not folded need to go into a small box and be secured

# Firearm Boxes



- Please use an approved handgun or long gun box

Unacceptable:  
Two bags taped together

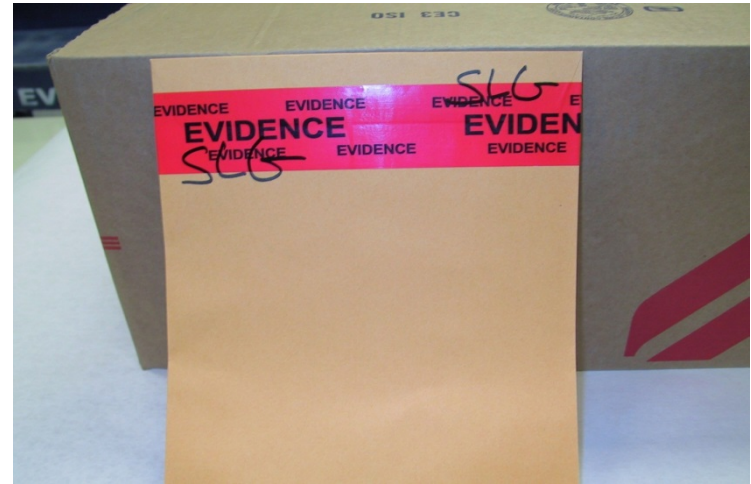
# Envelopes

- ❑ Size of container is important
  - **Too small:** evidence is difficult to place back in and seal after testing
  - **Too big:** evidence can be dispersed throughout container ( glass fragment, powder, etc.)
- Please leave one side of the envelope for our barcode



# What is a Proper Seal?

- ❑ An evidence container is properly sealed if:
  1. Its contents cannot readily escape
  2. Opening the container would result in obvious damage or alteration to the container or its tape seal
  
- ❑ All evidence must bear a proper seal which **must** include the initials of the person sealing the evidence. The initials should be half on the seal and half on the package.



# Is Your Agency Signed Up to Track SA Kits?

## *Benefits:*

- ▶ The program helps to comply with inventory required in Act 1168 of 2015
- ▶ Agency can see all their kits and progress of testing
- ▶ Victim can see progress through Criminal Justice System

## *How to Sign Up:*

- ▶ Visit Arkansas State Crime Lab website and click on the SA Kit banner
- or
- ▶ Call Beverly Pannell at 501-683-0470

000699 [HTTPS://CRIMELAB.SAKT.ARKANSAS.GOV](https://crimelab.sakt.arkansas.gov)

**STATE OF ARKANSAS**

**SEXUAL ASSAULT EVIDENCE COLLECTION KIT**  
*(DO NOT USE FOR SUSPECT COLLECTION)*

**FOR HOSPITAL PERSONNEL**  
(Please Print)

PATIENT'S NAME: \_\_\_\_\_

PHYSICIAN OR NURSE'S NAME: \_\_\_\_\_

MEDICAL FACILITY: \_\_\_\_\_

DATE COLLECTED: \_\_\_\_\_

KIT SEALED BY: \_\_\_\_\_

PLACED BY: \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ am pm

**FOR POLICE PERSONNEL**  
(Please Print)

LAW ENFORCEMENT AGENCY: \_\_\_\_\_

CASE NUMBER: \_\_\_\_\_

INVESTIGATING OFFICER'S NAME: \_\_\_\_\_

**CHAIN OF POSSESSION**

RECEIVED FROM: \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ am pm

RECEIVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ am pm

RECEIVED FROM: \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ am pm

**DELIVER TO CRIME LABORATORY IMMEDIATELY**

This service is provided free of charge by Arkansas Commission on Child Abuse, Rape and Domestic Violence.

# Submission Form

- ❑ The ASCL has two versions of our evidence submission forms
  - The “long form” ASCL-FORM-12\_WD is used for all submissions **except** Drugs and Toxicology.
  - The “short form” ASCL-FORM-63 is used **only** for Drugs and Toxicology.
- ❑ For the more serious or complex cases (e.g., homicide, rape, robbery, aggravated assault, burglaries), more information will be needed, such as the incident report.
- ❑ Evidence Source: it is important for us to know whom and where the sample was taken from.
- ❑ All submission sheets are available on the ASCL website.

[www.crimelab.arkansas.gov](http://www.crimelab.arkansas.gov)

# Submission Form



## ARKANSAS STATE CRIME LABORATORY EVIDENCE SUBMISSION FORM

P.O. Box 8500  
3 Natural Resources Drive  
Little Rock AR 72215  
Phone: (501) 227-5747  
Fax: (501) 227-0713

P.O. Box 868  
Hope AR 71802  
Phone: (870) 722-8530  
Fax: (870) 722-8534

[www.arkansas.gov/crime/lab](http://www.arkansas.gov/crime/lab)

Has any evidence been previously submitted on this case by any agency?  Yes  No

Agency Case #

ASCL Case #

If known, please list ASCL Case #

Investigating Agency

Investigating Officer (Prefix, First, Last)

If applicable, please list additional agencies involved

Phone

Mobile (optional)

Type of Offense

Date of Offense

County of Offense

E-Mail Address

Suspect	Victim	Name (LAST, First)	Arrested?	SID/SSN	DOB	Race	Sex
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> YES <input type="checkbox"/> NO				

**Juli's Law**—If a felony arrest was made, please answer the following:

Was a DNA sample collected on a DNA database kit for CODIS?  Yes  No Comments:

Were suspect known samples collected (on cotton swabs) to be used as references in this case?  Yes  No Comments:

If this case involves a sexual assault—Was there a consensual sexual act within the past 96 hours?  Yes  No Comments:

Detailed Summary of Crime (Use provided addendum if necessary):

### Important—please note the following:

- The Arkansas State Crime Laboratory (ASCL) shall select and use appropriate testing methods/procedures (please visit the ASCL website [www.arkansas.gov/crime/lab](http://www.arkansas.gov/crime/lab) to see methods available).
- The ASCL reserves the right to transfer evidence to another accredited laboratory when deemed necessary
- All evidence shall be properly packaged and sealed to prevent contamination and tampering
- All biologically contaminated evidence must be marked BIOHAZARD
- Sharps must be packaged in such a manner as to protect personnel during handling

**PE / DNA Requests**—Copies of Investigative Reports are requested.

Report attached:  Yes  No

If not, please forward to Evidence Receiving

**Firearms Submissions**—By signing, I hereby certify all listed firearms are unloaded.

Signature:

Date:

### LAB USE ONLY

HC USPS UPS FedEx DHL



## ARKANSAS STATE CRIME LABORATORY EVIDENCE SUBMISSION FORM

ASCL Case #

Agency Case #

All fields required except where noted

[www.arkansas.gov/crime/lab](http://www.arkansas.gov/crime/lab)

Evidence will be analyzed using a priority based system. List the priority of your evidence for analysis (1= highest)

Evidence #	Evidence Description	Physical Evidence/DNA Requests:		Requested Service (refer to codes below)
		1. List where item was collected	2. List who the item belongs to (if known)	
1				
2				
3				
4				
5				

Type of Analysis Requested:

Submitting Officer (print):

Signature

Date

**Requested Service Codes:**

DE: Digital Evidence  
DA: Drug Analysis  
FA: Firearms / Tool Marks / NIBIN  
IL: Illicit Laboratories  
LP: Latent Prints  
PE/DNA: Physical Evidence / DNA  
TOX: Toxicology

# Submission Form – Drugs/Tox



**ARKANSAS STATE CRIME LABORATORY**  
**EVIDENCE SUBMISSION FORM (Drugs & Toxicology Only)**

[www.arkansas.gov/crimelab](http://www.arkansas.gov/crimelab)

P.O. Box 8500  
 3 Natural Resources Drive  
 Little Rock AR 72215  
 Phone: (501) 227-5747  
 Fax: (501) 227-0713

P.O. Box 858  
 Hope AR 71802  
 Phone: (870) 722-8530  
 Fax: (870) 722-8534

Has any evidence been previously submitted on this case by any agency? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Agency Case #		ASCL Case #					
If known, please list ASCL Case #									
Investigating Agency			Investigating Officer (Prefix, First, Last)						
If applicable, please list additional agencies involved			Phone						
			Mobile (optional)						
Type of Offense	Date of Offense	County of Offense		E-Mail Address					
Suspect(s) (LAST, First)	SID/SSN	DOB	Race	Sex	Victim(s) (LAST, First)	SID/SSN	DOB	Race	Sex
Evidence #	Evidence Description				Evidence Source		Requested Service (refer to codes below)		
Detailed Summary of Crime (Use provided addendum if necessary):							Requested Service Codes: DA: Drug Analysis IL: Illicit Laboratories TP: Tampering TOX: Toxicology		
Type of Analysis Requested:							<b>LAB USE ONLY</b>		
<input type="checkbox"/> Y <input type="checkbox"/> N Were all urine samples for alcohol testing collected by Arkansas Department of Health (ADH) guidelines?									
<input type="checkbox"/> Y <input type="checkbox"/> N ARORA donor?									
<b>Important—please note the following:</b> <ul style="list-style-type: none"> <li>The Arkansas State Crime Laboratory (ASCL) shall select and use appropriate testing methods/procedures</li> <li>The ASCL reserves the right to transfer evidence to another accredited laboratory when deemed necessary</li> <li>All evidence shall be properly packaged and sealed to prevent contamination and tampering</li> <li>All biologically contaminated evidence must be marked BIOHAZARD</li> <li>Sharps must be packaged in such a manner as to protect personnel during handling</li> </ul>									
Submitting Officer (print):							HC USPS UPS FDX DHL		
Signature			Date						



# Evidence Submission Process

- ❑ Please make an appointment.
  - This streamlines the evidence submission process for all agencies
  - The sooner you make the appointment, the better chance you have of receiving the time slot that you prefer
- ❑ Please have all submission sheets signed before approaching counter. This will allow us to get you in and out in a more timely manner.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
8:00			Group 6		Russellville PD
8:30			↓		↓
9:00		Conway PD	Benton PD	Greene CO	NLR
9:30		↓	BRYANT PD	↓	↓
10:00	Jacksonville		Springdale	McGehee	NARCS
10:30	↓		↓	Pulaski	Faulkner CO
11:00				↓	↓
11:30				Benton CO	
12:00				↓	Hot Springs
12:30			Pine Bluff		↓
1:00		Little Rock ✓	↓	Rogers	Miller CO
1:30	Sherwood	↓	Bellavista	↓	↓
2:00		Bella Vista ✓	↓	West Memphis	Jefferson CO
2:30		↓		↓	Tri CO
3:00		Cabot ✓	Forrest city	Helena-West Helena	
3:30		↓	↓	↓	

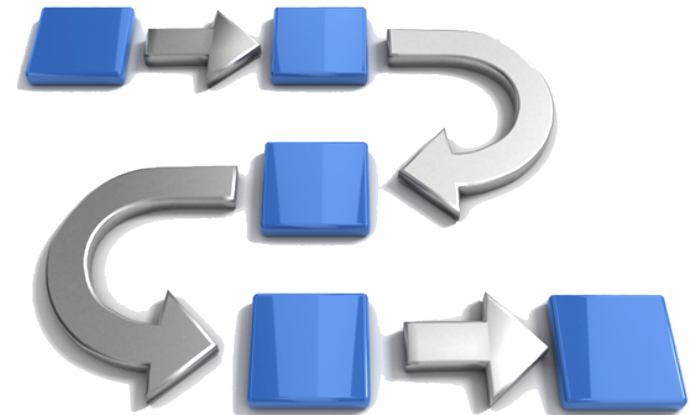
# Locker Submissions

- Only for Evidence lockboxes for officers with 10 cases or fewer
- DO **NOT** USE LOCKER FOR:
  - Firearms
  - Hazardous chemicals
  - Illicit lab materials
  - Homicides, or any case(s) that have special circumstances
- Evidence must be in a sealed container with officer initials going across tape seal or heat seal
- If submitting urine or blood, **PLEASE MAKE SURE CONTAINER IS SEALED TIGHTLY AND WILL NOT LEAK.**



# Locker Submission Process

- ❑ All submission sheets must be **date stamped** and **signed** by the officer putting the case(s) in the lockbox
- ❑ All submission sheets must be filled out completely, including having a **contact number** and/or **email address** for the investigating officer on the case
- ❑ There are several agencies that have the same abbreviations—please spell out your agency name on submission sheet
  - ❑ *Example: “JPD” can mean either Jonesboro or Jacksonville PD*
  - ❑ *Example: “Jacksonville” can mean either Jacksonville PD or Jacksonville FD*
- ❑ Make sure that the submission sheet is attached to the correct piece of evidence
- ❑ Write identifying marks on evidence packaging, such as the **agency case number** or **suspect/victim name**



# Evidence Pick Up

- ❑ Please pick up your evidence in a timely manner—we have limited storage space
- ❑ If you are submitting evidence for a different agency, we ask that you also pick up that agency's evidence (that is ready to be returned)



# Contact Information

Andrea Swift

Evidence Receiving Section Chief

[andrea.swift@crimelab.arkansas.gov](mailto:andrea.swift@crimelab.arkansas.gov)

ASCL Phone: 501-227-5747

Office: 501-683-6100

Fax: 501-227-0713

