Criminal Investigation Laboratory Evidence Registration	SOUTHWESTERN INSTITUTE OF FORENSIC SCIENCES AT DALLAS 2355 North Stemmons Freeway Dallas, TX 75207 214-920-5983 / 214-920-5864 (f)	Lab Use Only IFS Case #:
	IDENCE SUBMISSION FOR	M
Submitted/Delivered By: Printed Name: Signature: Phone:	Address:	
	Agency Name:Address:	
Agency To Bill: Same as Requested Contact Name: Phone:	By Agency Name:	
Case Information: Agency Name: Offense: Complainant: Suspect: Suspect:	Service/Case No Date of Offense: Date of birth: Date of birth: Date of birth:	
Submission Information:	Date of birth: Invoice Number:	
Lab Use Only	Evidence Listing	Analysis Requested
Other Comments: Notice: By using laboratory services,	Uate/Time Stamp:	eports as described on our website
	tments/swifs/simplified-reports.php). Full c	

(https://www.dallascounty.org/dep submitting agency upon request.

7363 - Evidence Submission Form SWIFS: Evidence Registration Issuing Authority: Director