



TEXAS DEPARTMENT OF PUBLIC SAFETY  
CRIME LABORATORY

**Expedited Analysis / Reanalysis Request Form**

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DPS Lab Case #:

REQUEST FOR:  EXPEDITED ANALYSIS  REANALYSIS

Agency Case #:

Subject Name:

**Requestor Contact Information**

Full Name / Title \_\_\_\_\_  
Agency Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Business Email \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Justification for Expedited Analysis (Required)**

Stated case involves:

- A threat to public safety (e.g., an unidentified serial rapist)
- An impact to court trials (*please describe*) \_\_\_\_\_ Results needed by \_\_\_\_\_
- An impact to jails (e.g., subject is confined for an extended period pending laboratory results)
- A high profile incident that draws national media attention
- Other \_\_\_\_\_

**Justification for Reanalysis without a Court Order (Required)**

- Case involves a warrantless blood draw
- Reanalysis is requested for administrative or quality assurance purposes
- Original analyst is unavailable for testimony
- New technology or procedure has become available
- Case involves a change in legal statutes or requirements
- Other \_\_\_\_\_

Customer Comments \_\_\_\_\_

Requestor Signature \_\_\_\_\_ Date \_\_\_\_\_

Due Date \_\_\_\_\_

Prosecuting Attorney \_\_\_\_\_ Phone \_\_\_\_\_

*For DPS Crime Laboratory Use Only:*

REQUEST:  APPROVED  DENIED OTHER LAB NOTIFIED:  YES  N/A

Type of analysis (e.g., Seized Drugs/Friction Ridge):

Evidentiary items:

Comments:

Supervisor/Lab Manager \_\_\_\_\_ Date \_\_\_\_\_

Date Requestor Notified \_\_\_\_\_ Method of Notification \_\_\_\_\_