

	<h1>Bureau of Corrections</h1>	Document Reference Code <b>NBP-PR-001-F003</b>	
		Revision No. 0	Effectivity Date 01/05/2018
<b>TRANSMITTAL TO CRIME LABORATORY FORM</b>		Page 1 of 1	

**FOR :**

**FROM :**

**SUBJECT :**

**DATE :**

1. Respectfully request to conduct laboratory examination on the accompanying specimen to determine the presence of dangerous drugs which was recovered to below-named inmate/s with the following details;

**DETAILS OF PERSON APPREHENDED**

Name :  
 Age :  
 Birth Day :  
 Sex :  
 Address :  
  
 Civil Status :  
 Place of Arrest :  
  
 Date/Time of Arrest :  
 Operating Unit :  
 Seizing Officer :  
 Rank :

2. Evidence Submitted:

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3. Further request furnish this office result of laboratory examination.

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 Superintendent  
 New Bilibid Prison