



TrueAllele® Case Submission Form

Date Submitted	
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1. Case Name

Cybergenetics	office use only
Lab	
Agency	
Other	

2a. Main Contact – Receive case results and reports

Name		Address	
Title		City/State/Zip	
Agency		Phone	
Agency Type	Public	Private	Non-profit
		Mobile	
		Email	

2b. Additional Contact

Name		Address	
Title		City/State/Zip	
Agency		Phone	
Should be copied on reports	Yes	No	
		Mobile	
		Email	

2c. Additional Contact

Name		Address	
Title		City/State/Zip	
Agency		Phone	
Should be copied on reports	Yes	No	
		Mobile	
		Email	

3a. Criminal Offense

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3b. Case Context

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4. Forensic Question

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5. Case Reports

File Name	Description

6. Time Frame

Date	Reason

7. Additional Information

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8. Items Table

Be sure to enter your evidence item(s) and reference items(s) identifying names and description into the table on page 3 of this form. This descriptive information can come directly from the laboratory’s DNA reports or other official documentation.

If more space is needed, please use an additional Items page.

9. Submit Form

Be sure to enter your information directly into this electronic form. Do not use paper. Check that you have read and followed the TrueAllele Case Submission Instructions.

Please email your completed form to Cybergenetics at data@cybgen.com. If you have any questions, contact Cybergenetics at 412.683.3004.

NOTE: Cybergenetics only accepts electronic DNA data. DO NOT send biological evidence.

Items

For References

Item #	Other #	Description	Additional Information	Role	Relation