



COUNTY OF LOS ANGELES
DEPARTMENT OF MEDICAL EXAMINER
1104 N. MISSION RD, LOS ANGELES, CALIFORNIA 90033

Odey C. Ukpo, M.D., M.S.
Chief Medical Examiner

Forensic Science Laboratories
Extended Evidence Retention Request

Date

Request for Evidence Hold

Case Number

Decedent's Name

Name of Requestor

Requestor's Agency

Requestor's Phone Number

Requestor's Address

Requestor's Address

Requestor's City/State Zip Code

Email Address

Items Requested

Toxicology Samples..... Histology Samples.....

Samples for Future DNA testing... Other samples (please specify).....

Reason for Hold Request

The extended evidence retention fee is **\$420.00** for a **five-year extension**. After five years, unless other arrangements have been made, this evidence will be destroyed in accordance with Department Policy.

Mail Payments to: Los Angeles County Department of Medical Examiner
Forensic Laboratory - Extended Evidence Retention Requests
1104 North Mission Road
Los Angeles, CA 90033

Payment by Check or Money Order
Make checks payable to: *Los Angeles County Department of Medical Examiner*