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Investigative Genetic Genealogy Sample Request Form

Please enter ALL applicable *Case Information* and *Contact Information* fields.

This form should be used to request a sample to be released and submitted to an external laboratory for investigative genetic genealogy testing. IGG sample request forms will not be accepted if required fields are missing. All submitted forms must be typed, complete, correctly filled out and submitted via email. We will not accept handwritten or incorrect forms. **Each sample being requested must have a separate form. Please note that should additional testing be needed on a spotted extract requested for IGG, no additional report will be issued. Information concerning that testing will be noted in the case communication log.**

Case Information (REQUIRED BY REQUESTOR):

Crime Type: _____ Date of Request: _____
 ME Number: _____ Complaint Number: _____
 Forensic Biology Case Number: _____ Voucher Number: _____
 Name of Victim: _____

Contact Information (REQUIRED BY REQUESTOR):

Name of Requestor: _____ Requesting Agency: _____
 NYPD Contact Name: _____ NYPD Division: _____
 DAO Contact Name: _____ DA Office: _____
 NYPD Email: _____ NYPD Phone: _____
 DAO Email: _____ DAO Phone: _____

Sample name
 as listed on
 the report and
 amount (ul)
 requested:

FOR INTERNAL USE ONLY:

Date of Release: _____ Amount of Sample Released: _____
 Sample Released To: _____ Sample Released By: _____
 Discussed and approved at IRC (if applicable)

Approved by: IGG Coordinator
 Date Effective: 04/24/2023