



**NYC**  
**Office of Chief  
 Medical Examiner**

**Department of Forensic Biology**  
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 Telephone: 212-323-1200  
 Official Website: [www.nyc.gov/ocme](http://www.nyc.gov/ocme)

**Request for Forensic Biology Criminalist Testimony List**

Please enter all fields within this form.

Requests for a list of cases for criminalist testimony for the last 4 years will be processed in the order they are received and completed within approximately 10 business days. **Expedited requests will be accommodated when possible.** Each request requires a separate form. Please be sure to provide an email address below. Any forms filled out incorrectly will be rejected and emailed back to the requestor. Please note that this form cannot be used to request discovery for testing performed by the Department of Forensic Biology. You must still separately submit the Forensic Biology Discovery Request form.

**Date of Request:** \_\_\_\_\_ **Indictment No:** \_\_\_\_\_  
**Name of the Case:** \_\_\_\_\_ **NYPD 61 #:** \_\_\_\_\_  
**FB Number:** \_\_\_\_\_ **FBS Number:** \_\_\_\_\_  
**Testifying Criminalist:** \_\_\_\_\_ **Adj. Date:** \_\_\_\_\_

**Comments /  
 Additional  
 Information:**

**Contact Information:**

**Paralegal / Other Contact Information:**

**Attorney Name:** \_\_\_\_\_ **Name:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
**Email:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
**District:** \_\_\_\_\_

Please email this form to: [fbiologydiscovery@ocme.nyc.gov](mailto:fbiologydiscovery@ocme.nyc.gov)