



**Rick Staly, Sheriff**  
**FLAGLER COUNTY SHERIFF'S OFFICE**

*"An honor to serve, a duty to protect."*

**EVIDENCE/PROPERTY PROCESSING/LAB REQUEST FORM**

<b>Request Date</b>	4/29/2024	<b>Case #</b>	2024-25353
<b>Item #</b>	<b>DESCRIPTION OF ITEM</b> (Type, Make, Model, Color, Serial #, Marks, etc.)		
720-1	DNA Buccal Swabs from Amber Delaney McCann		
<b>SYNOPSIS</b>			
<small>FILL IN SYNOPSIS FOR PROCESSING REQUESTS AND/OR DNA FROM PROPERTY CRIMES ONLY</small>			
<small>Synopsis: A description of the case, include how evidence submitted relates to case. Be specific on what processing is to be done:</small>			
The SAO Requested a DNA sample, via cart order, from Amber McCann, be removed to other items in their case.			
<b>PROCESSING BEING REQUESTED</b>			
<input type="checkbox"/> FA		<input type="checkbox"/> Digital	<input checked="" type="checkbox"/> DNA
<input type="checkbox"/> FP			
<b>EMPLOYEE MAKING REQUEST:</b> Signature: <u>Seal</u> ID # <u>720</u> Printed Name: <u>Det. Scalia</u>			
<b>DNA CONSENT</b>			
<p>The listed member of the Flagler County Sheriff's Office (FCSO) has properly identified themselves to me and has asked for my consent to retrieve a blood and/ or buccal swab from my person. I willingly and voluntarily give written consent to the member of the FCSO to obtain a blood and/or buccal swab from my person. I understand that this sample may be stored in a database for future comparisons. This form was signed by me without any threats and/or promises of any kind.</p>			
Signature: _____	Print Name: _____	Signature: _____	Print Name: _____
Signature: _____	Print Name: _____	Signature: _____	Print Name: _____
Signature: _____	Print Name: _____	Signature: _____	Print Name: _____