

CODIS HIT CONFIRMATION SEARCH WARRANT USING BUCCAL SWAB for DNA Comparison

(As of 05/22/12)

(Use this language on top of page 1 & middle of page 5)

(Does State's Attorney require a Lab location? If not, delete it below in all areas)

To obtain saliva secretions and buccal cell samples (cheek epithelial cells). These samples will be obtained by swabbing the interior of the suspect's mouth cavity between the cheek and teeth with proper medical swabs using safe, reliable, and minimal intrusive procedures. ***(The sample(s) will be submitted to the Department of Public Safety Forensic Science Laboratory located at 278 Colony Street, Meriden, CT. for the purpose of DNA identification and comparison, under laboratory case # (Put lab case # Here).***

(Use this language on the bottom of page 1, top of page 5 and top of page 6)

The person of **NAME OF SUSPECT, DOB, RACE/SEX, & ADDRESS.**

(Number your paragraphs and begin your narrative section with your Affiants qualifications and establishing your probable cause. Describe the underlying crime and pertinent facts)

(Closing Paragraphs to include):

(Does State's Attorney require a Lab location? If not, delete it below in all areas)

That on **DATE**, Affiant **NAME** received an offender hit notification from ***(the Connecticut Department of Public Safety Forensic Science Laboratory DNA Database Unit)***, of a DNA match on the evidence collected at the scene of the above described ***(ie. burglary / criminal mischief)*** located at **(NAME LOCATION/SCENE)** with the ***(state or national)*** offender DNA database. ***(The Connecticut State Forensic Laboratory)*** uses standardized and documented procedures to extract, amplify and detect DNA from evidentiary items are samples taken from known individuals. The resulting DNA profiles from the evidentiary items will be compared to the known individuals' profiles and the results documented in a laboratory report. The match in this particular crime was with **(NAME OF SUSPECT - DOB)**, SPBI # **(?????)** / Database number **(?????)** having Connecticut Department of Corrections Inmate # **(?????)**. According to the Department of Corrections records, on **(DATE)**, a known DNA sample was obtained from **(SUSPECT'S NAME)** during **(HIS/HER)** incarceration with the Connecticut Department of Corrections, under inmate # **(?????)**. **(SUSPECT'S NAME)** was convicted of a felony, and under Connecticut law is required to submit to a DNA swabbing as a convicted felon. The offender hit notification stated that a formal laboratory report would be issued upon the submission and processing of a confirmatory biological sample from the identified offender.

Affiant (**NAME**) conducted a criminal records check on (**SUSPECT'S NAME**) and found that **he/she** has an extensive arrest record including (**LIST CRIME(S) HERE**). (**SUSPECT' NAME HERE**) is presently incarcerated at **NAME OF** Correctional Institution which is located at (**ADDRESS OF INSTITUTION**), Connecticut. That upon checking with the State of Connecticut Department of Corrections (NCIC) records, Affiant (**NAME**) discovered that (**SUSPECT'S NAME**) has a DOC inmate number # (**?????**). That number is exclusively issued to (**SUSPECT'S NAME**) by the Department of Corrections.

(Based on your Affiants training and experience, we are aware that the Department of Public Safety Forensic Science Laboratory, 278 Colony Street, Meriden, CT.) has the ability, expertise, and procedures to conduct scientific analysis on biological samples, including saliva secretions and buccal cell samples, to identify and compare DNA profiles from evidence obtained at crime scenes and from victims and, or perpetrators of crimes.

Therefore, your affiants believe there is sufficient probable cause for a search and seizure warrant to be issued to obtain saliva secretions, and buccal cell samples from the suspect (**SUSPECT'S NAME - DOB, RACE & GENDER**). These samples will be obtained by swabbing the interior of the suspect's mouth cavity between his cheek and teeth with proper medical swabs using safe reliable and minimally intrusive procedure under universal hygienic precautions within a reasonable period of time. The samples will then be submitted to (***the Department of Public Safety, Forensic Science Laboratory, 278 Colony Street, Meriden, CT.***) for scientific examination and testing, including DNA identification and comparison, to identify the perpetrator.

(Use this laboratory language in proper box on pages 3 & 5 of a search warrant)

(The items seized will be submitted to the Department of Public Safety Forensic Science Laboratory located at 278 Colony Street in Meriden, CT.)