United States Probation and Pretrial Services
Eastern District of Oklahoma
Chain of Custody for Drug Analysis

*REQUIRED (FAILURE TO COMPLETE WILL DELAY PROCESSING)		Screening Tray No.			
*Offender/Defendant Name (last, first, MI)					
*Date of Birth	*PACTS NO.				
Date of Billin			SPECIMEN	I ID LABE	
- · · · · ·	- ·· <u>-</u> · · ·	FLACE	SPECIME		
*Status (check one)	*Supervising Federal				
Presentence / Pretrial Supervision / Probation	Officer:				
*Collection Date	*Collection Time	Admitted Illegal Drug Use by Offender / Defendant			
	AM PM				
	If so, list substance(s) and date(s) with donor initial in space above.				
Medications (include date taken)		Special Test Optio			
,	PCP Hydrocodone ETOH 6-AM Other:				
		-			
		Benzo Fentany	1 U.	XY Bupre	enorphine
Collector Comments:	UnobservedAp	ppears Diluted	BAC (if appli	cable)	
OFFENDER/DEFENDANT CE I certify that the information I provided		COLLECTOR CER			ant provide the
that the specimen I have provided or	h this date is my own and has not	specimen identified by	the Specimen	ID Label on th	is form. I certify that
been adulterated or diluted. The specimen bottle by me, and I ha	security seal was applied to the ave verified that the specimen	the security seal was a have verified that the s			
identification on this form and the bott		are identical.	poon		
□ Check if the above offender/defendant failed to provide a urine specimen, and fax this form to the supervising officer.					
Offender / Defendant Signature	Date /defendant failed to provide a	Collector Signature a urine specimen, ar	nd fax this f	orm to the s	Date Supervising officer.
Check if the above offender		a urine specimen, ar	nd fax this f	orm to the s	
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> </ul>	/defendant failed to provide a	a urine specimen, ar Date:			upervising officer.
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> <li>ON-SITE LABORATORY US</li> </ul>	/defendant failed to provide a	a urine specimen, ar	nd fax this f	orm to the s	
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> </ul>	/defendant failed to provide a	a urine specimen, ar Date: TEST DATE:	REV'D BY:	NEGATIVE	TEST TIMES
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> <li>ON-SITE LABORATORY US</li> </ul>	/defendant failed to provide a	a urine specimen, ar Date:	REV'D BY:		upervising officer.
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> <li>ON-SITE LABORATORY US</li> </ul>	/defendant failed to provide a	a urine specimen, ar Date: TEST DATE:	REV'D BY:	NEGATIVE	TEST TIMES
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> <li>ON-SITE LABORATORY US</li> </ul>	/defendant failed to provide a SE ONLY Specimen Received Intact and received by:	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u>	REV'D BY: ON-SITE	NEGATIVE	TEST TIMES
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> <li>ON-SITE LABORATORY US</li> </ul>	/defendant failed to provide a SE ONLY Specimen Received Intact and received by:	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u> AMPHETAMINE	REV'D BY: ON-SITE	NEGATIVE	TEST TIMES
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> <li>ON-SITE LABORATORY US</li> </ul>	/defendant failed to provide a SE ONLY Specimen Received Intact and received by:	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u> AMPHETAMINE CANNABINOID	REV'D BY: <u>ON-SITE</u>	NEGATIVE	TEST TIMES
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> <li>ON-SITE LABORATORY US</li> </ul>	/defendant failed to provide a SE ONLY Specimen Received Intact and received by:	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u> AMPHETAMINE CANNABINOID COCAINE	REV'D BY:	NEGATIVE	TEST TIMES
Check if the above offender. Staff Signature: ON-SITE LABORATORY US	/defendant failed to provide a SE ONLY Specimen Received Intact and received by:	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u> AMPHETAMINE CANNABINOID COCAINE OPIATE	REV'D BY:	NEGATIVE	TEST TIMES
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> <li>ON-SITE LABORATORY US</li> </ul>	/defendant failed to provide a SE ONLY Specimen Received Intact and received by:NOYES	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u> AMPHETAMINE CANNABINOID COCAINE OPIATE BENZODIAZEPINE	REV'D BY:	NEGATIVE	TEST TIMES
<ul> <li>Check if the above offender.</li> <li>Staff Signature:</li> <li>ON-SITE LABORATORY US Date Specimen Received</li> </ul>	/defendant failed to provide a         SE       ONLY         Specimen Received Intact and received by:        NO      YES         E       BARCODE	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u> AMPHETAMINE CANNABINOID COCAINE OPIATE BENZODIAZEPINE ETHYL ALCOHOL	REV'D BY:	NEGATIVE	TEST TIMES
Check if the above offender. Staff Signature: ON-SITE LABORATORY US Date Specimen Received PLACE ON-SIT	/defendant failed to provide a         SE       ONLY         Specimen Received Intact and received by:        NO      YES         E       BARCODE	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u> AMPHETAMINE CANNABINOID COCAINE OPIATE BENZODIAZEPINE ETHYL ALCOHOL OXYCODONE PHENCYCLIDINE	REV'D BY:	NEGATIVE	TEST TIMES
Check if the above offender. Staff Signature: ON-SITE LABORATORY US Date Specimen Received PLACE ON-SIT	/defendant failed to provide a         SE       ONLY         Specimen Received Intact and received by:        NO      YES         E       BARCODE	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u> AMPHETAMINE CANNABINOID COCAINE OPIATE BENZODIAZEPINE ETHYL ALCOHOL OXYCODONE PHENCYCLIDINE 6-AM	REV'D BY:	NEGATIVE	TEST TIMES
Check if the above offender. Staff Signature: ON-SITE LABORATORY US Date Specimen Received PLACE ON-SIT	/defendant failed to provide a         SE       ONLY         Specimen Received Intact and received by:        NO      YES         E       BARCODE	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u> AMPHETAMINE CANNABINOID COCAINE OPIATE BENZODIAZEPINE ETHYL ALCOHOL OXYCODONE PHENCYCLIDINE 6-AM BUPRENORPHINE	REV'D BY:	NEGATIVE	TEST TIMES
Check if the above offender. Staff Signature: ON-SITE LABORATORY US Date Specimen Received PLACE ON-SIT	/defendant failed to provide a         SE       ONLY         Specimen Received Intact and received by:        NO      YES         E       BARCODE	a urine specimen, ar Date: TEST DATE: <u>POSITIVE</u> AMPHETAMINE CANNABINOID COCAINE OPIATE BENZODIAZEPINE ETHYL ALCOHOL OXYCODONE PHENCYCLIDINE 6-AM BUPRENORPHINE FENTANYL	REV'D BY:	NEGATIVE	TEST TIMES
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Check if the above offender. Staff Signature: ON-SITE LABORATORY US Date Specimen Received PLACE ON-SIT	/defendant failed to provide a         SE       ONLY         Specimen Received Intact and received by:        NO      YES         E       BARCODE	a urine specimen, ar Date: TEST DATE: POSITIVE AMPHETAMINE CANNABINOID COCAINE OPIATE BENZODIAZEPINE ETHYL ALCOHOL OXYCODONE PHENCYCLIDINE 6-AM BUPRENORPHINE FENTANYL HYDROCODONE	REV'D BY:	NEGATIVE	TEST TIMES           /           ON-SITE RETEST
Check if the above offender. Staff Signature: ON-SITE LABORATORY US Date Specimen Received PLACE ON-SIT LABEL	/defendant failed to provide a         SE       ONLY         Specimen Received Intact and received by:        NO      YES         E       BARCODE	a urine specimen, ar Date: TEST DATE: POSITIVE AMPHETAMINE CANNABINOID COCAINE OPIATE BENZODIAZEPINE ETHYL ALCOHOL OXYCODONE PHENCYCLIDINE 6-AM BUPRENORPHINE FENTANYL HYDROCODONE	REV'D BY:	NEGATIVE	TEST TIMES           /           ON-SITE RETEST
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PSA21 (rev. 01/2018 SND)