

Department of State Police
Office of Alcohol Testing
 31 Macarthur Avenue
 Devens, Massachusetts 01434
 Tel. 978.392.4050 Fax 978.392.4030

**SERUM CONVERSION
 REQUEST FORM**

Date of Request:		Court Date*:	
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ARREST INFORMATION

Defendant: <small>(Last, First, MI)</small>		Charges:	
Arresting Dept:		Date of Arrest:	
Court Location:		Docket No:	
Hospital:		Result:	

NOTE: Attach a copy of the Hospital Laboratory Result

REQUESTED BY

Name:					
Telephone:		Fax:			
Email:					
Agency:					
Address:					
City:		State:		Zip:	

Cases will not be assigned and reports will not be issued until a court date has been provided.

