



## FLORIDA DEPARTMENT OF LAW ENFORCEMENT Unknown Deceased Identification Request Form

*This form may be duplicated for future use.*

Please complete this form and submit with fingerprint cards for unidentified decedents.

Original fingerprint cards are preferred. If an original card is not available, a photographic copy should be submitted. Please ensure that the National Crime Information Center Number, Medical Examiner Case Number, and Agency Case Number are included on the cards. All fingerprint cards will be returned to you.

Cards should be mailed to FDLE at the address below. FDLE will conduct a search of state (FDLE) files, unsolved latent fingerprint files, and national (FBI) fingerprint files. If an identification is made, you will be contacted via telephone immediately. FDLE will prioritize processing of these requests.

Agency Name: \_\_\_\_\_

Agency Contact: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Fax Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

Contact Mailing Address: \_\_\_\_\_

Number of Requests Attached: \_\_\_\_\_

Please mail original fingerprint cards to:

Florida Department of Law Enforcement  
Quality Control and Compromised Identity Section  
P.O. Box 1489  
Tallahassee, FL 32302-1489  
Attn: Doretha Scruggs

Should you have any questions, please contact Doretha Scruggs at 850-410-7896 or via email at [dorethascruggs@fdle.state.fl.us](mailto:dorethascruggs@fdle.state.fl.us)