

Commonwealth of Virginia
Department of General Services
Division of Consolidated Laboratory Services
Richmond, Virginia

Anonymous NFK Storage Extension Request Written Objection to Destruction

I am requesting the Division of Consolidated Laboratory Services (DCLS) extend the holding period of my Neck & Fingernails Kit (NFK) corresponding to:

NFK Kit Number: _____

Date of Exam: _____

Jurisdiction or Submitting Hospital: _____

I understand that in accordance with Virginia Code §19.2-11.6:

- DCLS will store my NFK for an additional period of 10 years as a result of my written notification.*
- After the additional 10-year storage period, DCLS may destroy my NFK without contacting me.*
- DCLS will not release my NFK unless notified by either law-enforcement or an attorney for the Commonwealth that I have elected to report my offense to law-enforcement.*

By signing/initialing below, I acknowledge that I understand the information above and that this request serves as my official request to extend my NFK storage and retention by DCLS for an additional ten (10) years. I further acknowledge that this written objection form is not a contract and does not create contractual obligations.

Victim's signature/initials: _____

Date of Request: _____