West Virginia State Police
725 Jefferson Road
South Charleston, West Virginia 25309-1698
Forensic Laboratory

Colonel J. L. Mitchell
Superintendent

MEMORANDUM OF UNDERSTANDING

The West Virginia State Police Forensic Laboratory (WVSPFL) utilizes the JusticeTrax® Laboratory Information Management System (LIMS) to collect, process, record, report and store case data. JusticeTrax Portal®, a component of the LIMS application, allows customers (i.e. law enforcement agencies, prosecuting attorneys, etc.) the ability to access their completed laboratory reports through an online website. This MOU designates the responsibility of the customer seeking access to those reports.

The ***West Virginia State Police Forensic Laboratory's*** responsibilities include:

- Maintaining the security of the Portal® website
- Maintaining the data/information available on the Portal® website
- Creating the primary agency Administrative User's account in Portal®
- Assisting the agency's user(s) with troubleshooting issues that arise with the Portal® website

The ***Customer's*** responsibilities include:

- Designating an authorized individual within the agency to be the Administrative User who then will be responsible for the agency's access to the Portal® website ***Note:*** *The appropriate agency official is responsible for authorizing the selected agency Administrative User.*
- The agency Administrative User will create user accounts for individuals within his/her agency.
- The agency Administrative User will deactivate any individual's account who is no longer employed with the agency within a timely manner. ***Note:*** *Users have access to sensitive information. Users will still have access to this information post-employment if their accounts are not deactivated.*
- Ensuring that the Portal® website is used for official purposes only and only for the user(s) to view his/her individual case(s).
- Contacting the Laboratory if any issues arise with the use of the Portal® website.

The following information must be provided for the agency Administrative User:

Agency Name	
Printed Name (First, Middle Initial, Last)	Title
Email Address	Phone Number

_____ _____
Authorizing Official's Name (please print and sign) Date

_____ _____
Laboratory Official's Name (please print and sign) Date

Please email completed forms to LIMS@WVSP.GOV

Integrity Fairness Respect Honesty Courage Compassion