

# Drug Cases Submitted to the Virginia Department of Forensic Science Calendar Year 2025

Produced by the Virginia Department of Criminal Justice Services  
in partnership with the Virginia Department of Forensic Science



[www.dfs.virginia.gov](http://www.dfs.virginia.gov)



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# Drug Cases Submitted to the Virginia Department of Forensic Science

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## Data Sources

Drug submission data for this report were provided by the Virginia Department of Forensic Science (DFS), using information collected for the National Forensic Laboratory Information System. Annual totals presented here may be slightly lower than previous reports. Some submissions (fewer than 0.1% overall) were double-counted in cases in which testing for two different samples within a submission were completed in different months.

Arrest data were taken from the annual *Crime in Virginia* reports prepared by the Virginia State Police (VSP), <https://vsp.virginia.gov/sections-units-bureaus/bass/criminal-justice-information-services/uniform-crime-reporting/#UCR-IBR>

Population data used to calculate rates were retrieved from the Weldon Cooper Center for Public Service, <https://demographics.coopercenter.org/virginia-population-estimates>

Data analysis was provided by the Virginia Department of Criminal Justice Services (DCJS) Criminal Justice Research Center, <https://www.dcjs.virginia.gov/criminal-justice-research-center>

# Drug Cases Submitted to the Virginia Department of Forensic Science

## Introduction

Every year, tens of thousands of drug samples are submitted to the Virginia Department of Forensic Science (DFS). These submissions arrive in many forms, including powders, solid material, liquids, pills, plants, residue, and more. At DFS, they are tested by the Controlled Substances Section, to identify the presence of controlled substances. Hundreds of unique substances are identified each year, and they include illegal drugs, prescription drugs, and over-the-counter medications.

The frequency with which individual drugs are identified in DFS drug testing can help in understanding the level of availability of those drugs within Virginia, and how that level of availability has changed over time. This report looks at selected drug categories of interest, showing how frequently those drugs are submitted to DFS, both statewide and regionally. The drug categories examined here are among the most common submissions and include both illicit substances and prescription drugs with a potential for abuse. In some cases – particularly with regard to designer drugs and cannabimimetic agents – a substance is identified before it is explicitly listed as a controlled substance in the *Code of Virginia*. Those cases are still counted in this report.

- Illicit substances
  - ◇ Cocaine
  - ◇ Methamphetamine
  - ◇ Heroin
  - ◇ Illicit synthetic opioids (primarily illicitly produced fentanyl and fentanyl analogs)
  - ◇ Illicit benzodiazepines
  - ◇ Hallucinogenic substances (such as LSD, PCP, and psychoactive mushrooms)
  - ◇ Cannabimimetic agents (also known as synthetic cannabinoids)
  - ◇ Other designer drugs (excluding those included in any of the categories above)
- Prescription drugs
  - ◇ Opioids (such as oxycodone and morphine)
  - ◇ Stimulants (primarily medications to treat ADD/ADHD)
  - ◇ Benzodiazepines (such as alprazolam and diazepam)

Each of the drug categories listed is presented separately in the pages that follow. These pages report changing trends in both time and geography, as the availability of individual drugs (as measured by the number of submissions to DFS) changed differently for different regions in Virginia. This report examines regional trends using the Virginia State Police (VSP) Divisions, as well as the smaller Virginia Court Districts. A listing of

the counties and cities within the seven VSP divisions, and within the 32 Court Districts, is included in Appendix D.

The pages that follow report the following for each drug category: trends in submissions between 2016 and 2025; the 2025 frequency of submissions of various subcategories of drugs within these larger categories, where applicable; the regional distribution of 2025 submissions; the 2025 rate of submissions, by VSP Division; and maps presenting the trend in submission rates for the 32 Virginia Court Districts, for 2015, 2020, and 2025.

Note that drug submissions in this report may be counted differently than in some other reports of DFS data. For this report, if a submission included at least one substance within a drug category it is counted as a single submission, even if multiple substances within that category were identified. When data are presented for subcategories (e.g., specific prescription opioids), a subcategory is counted once regardless of how many samples of that substance were included in the submission. The sum of the subcategories (where relevant) will usually not equal the total for the drug category, as there are submissions that meet the criteria for multiple subcategories but are still only counted once for the broader category.

# 2025 Drug Submissions to DFS – Highlights

## Summary

Overall, drug submissions to DFS decreased in CY 2025, but that varied across the different drug categories.

- Several drug categories included here did show an increase between 2024 and 2025:
  - ◊ Cocaine submissions increased 11%
  - ◊ Cannabimimetic Agent submissions increased 9%
- Submissions of Hallucinogenic Substances and Prescription Opioids remained essentially unchanged, increasing less than half of 1%.
- Other drug categories showed a decrease:
  - ◊ Heroin submissions decreased 2%
  - ◊ Prescription Benzodiazepine submissions dropped 3%
  - ◊ Prescription Stimulant submissions dropped 3%
  - ◊ Illicit Benzodiazepine submissions dropped 4%
  - ◊ Methamphetamine submissions dropped 6%
  - ◊ Illicit Synthetic Opioid submissions dropped 27%
  - ◊ Other Designer Drug submissions dropped 81%

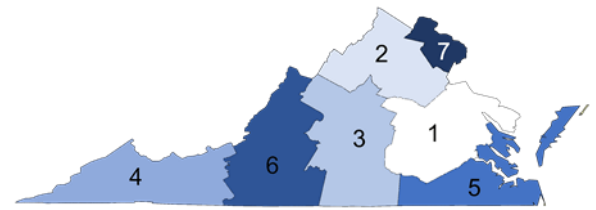
The 2025 rate of drug submissions per 100,000 population varied by drug type and Virginia State Police division (VSP):

**Cocaine:** The rate of submissions was highest from VSP 1, and lowest from VSP 4.

**Methamphetamine:** Rate of submissions was highest from VSP 4, and lowest from VSP 7.

**Prescription Stimulants:** Rate of submissions was highest from VSP 2, and lowest from VSP 7.

**Heroin:** Rate of submissions was highest from VSP 6, and lowest from VSP 7.



Virginia State Police Divisions (VSP)

**Illicit Synthetic Opioids:** Rate of submissions was highest from VSP 4, and lowest from VSP 3.

**Prescription Opioids:** Rate of submissions was highest from VSP 4, and lowest from VSP 7.

**Illicit Benzodiazepines:** Rate of submissions was highest from VSP 4, and lowest from VSP 5.

**Prescription Benzodiazepines:** Rate of submissions was highest from VSP 4, and lowest from VSP 7.

**Hallucinogenic Substances:** Rate of submissions was highest from VSP 4, and lowest from VSP 7.

**Cannabimimetic Agents:** Rate of submissions was highest from VSP 6, and lowest from VSP 7.

**Other Designer Drugs:** Rate of submissions was highest from VSP 7, and lowest from VSP 3.

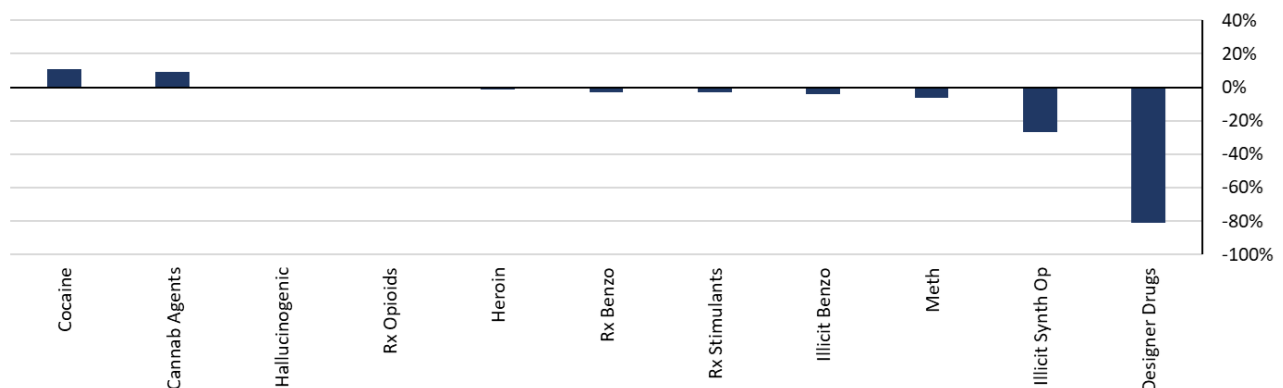
## Top Ten

The ten most common substances identified in 2025 were:

- |                    |                  |
|--------------------|------------------|
| 1. Cocaine         | 6. Buprenorphine |
| 2. Methamphetamine | 7. Xylazine      |
| 3. Fentanyl        | 8. Naloxone*     |
| 4. Marijuana*      | 9. Oxycodone     |
| 5. Heroin          | 10. Psilocyn     |

\*Marijuana and naloxone are not included in this report

## Change in Submissions—CY 2024 to 2025



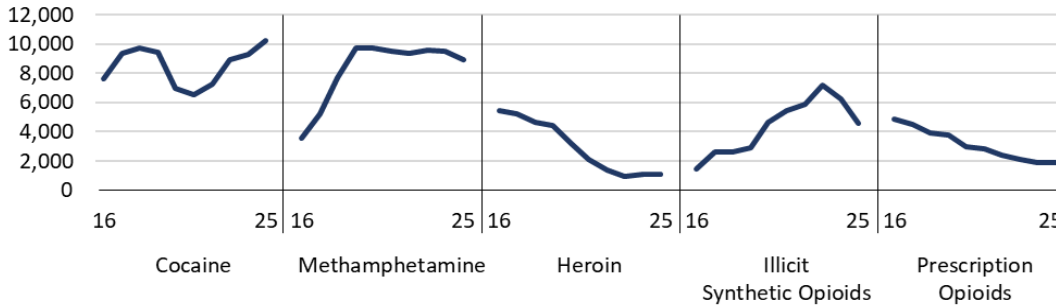
# 2025 Drug Submissions to DFS – Highlights

## Ten-Year Trends

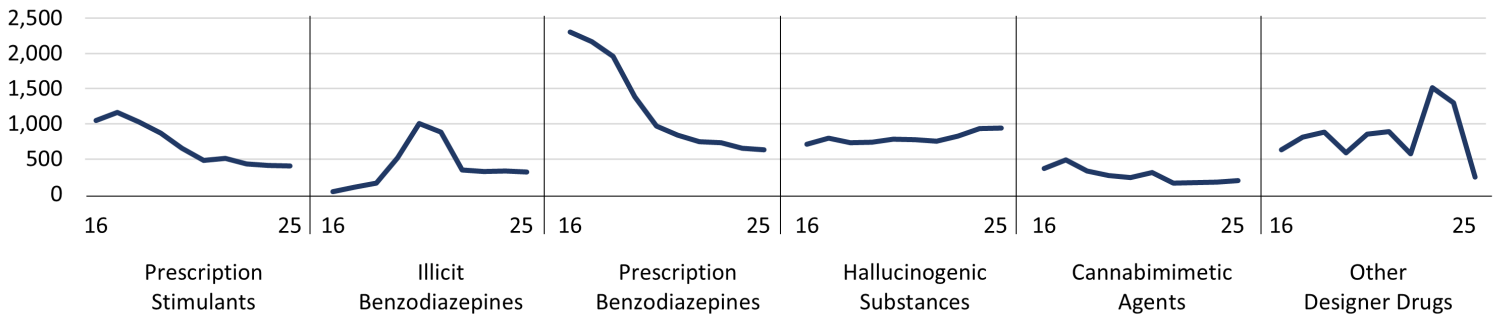
The graphs below present ten-year trendlines for the substances/substance categories included in this report. Note that the two graphs have different scales, so that the trends

can be clearly displayed. Please see the sections for the individual substances/substance categories for more details on these trends.

Submissions for Select Drugs, CY 2016-2025



Submissions for Select Drugs, CY 2016-2025



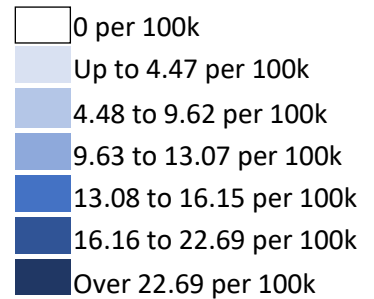
## Emerging Trend—Xylazine

Xylazine is a veterinary tranquilizer that, mixed with fentanyl, has been involved in a rising number of overdose fatalities across the country. DFS only began requiring the reporting of xylazine in August 2021. Data prior to that time would not provide a complete picture. Xylazine cases increased from 2021 to 2023, but have decreased since. In CY2025, xylazine represented 3% of submissions and decreased 27% from CY2024.

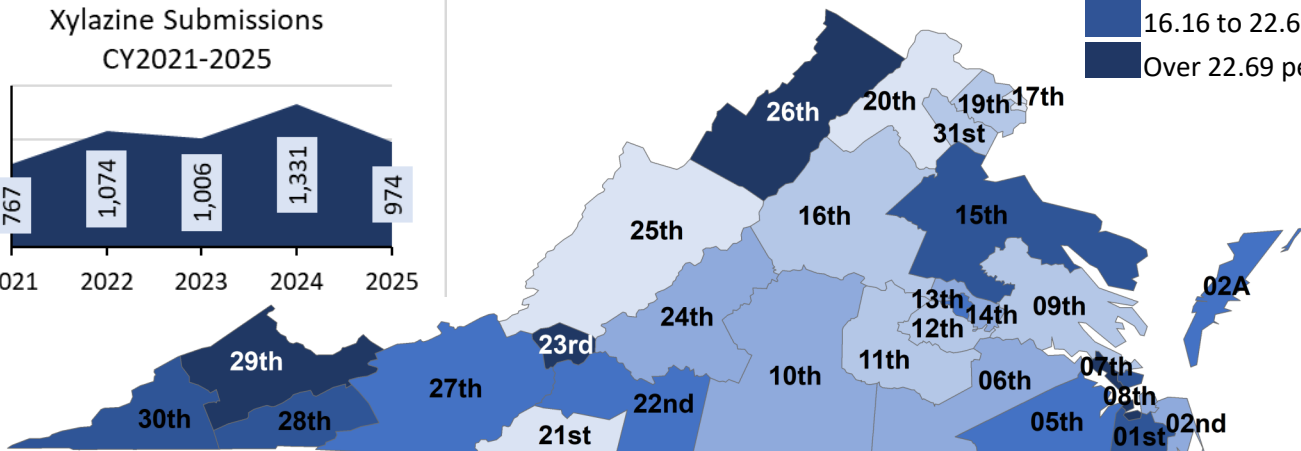
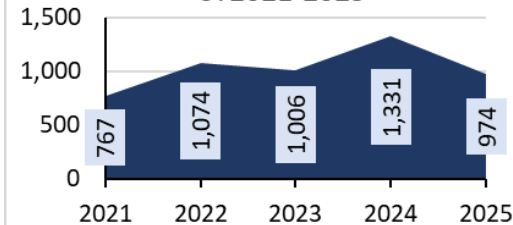
### Xylazine Submissions by Court District

Rate per 100,000  
CY 2025

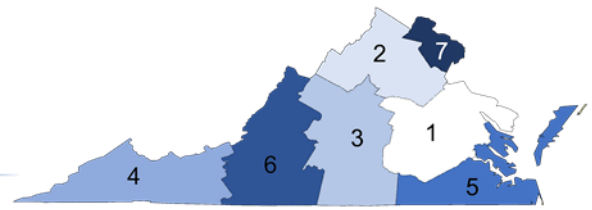
Statewide Rate: 11.3



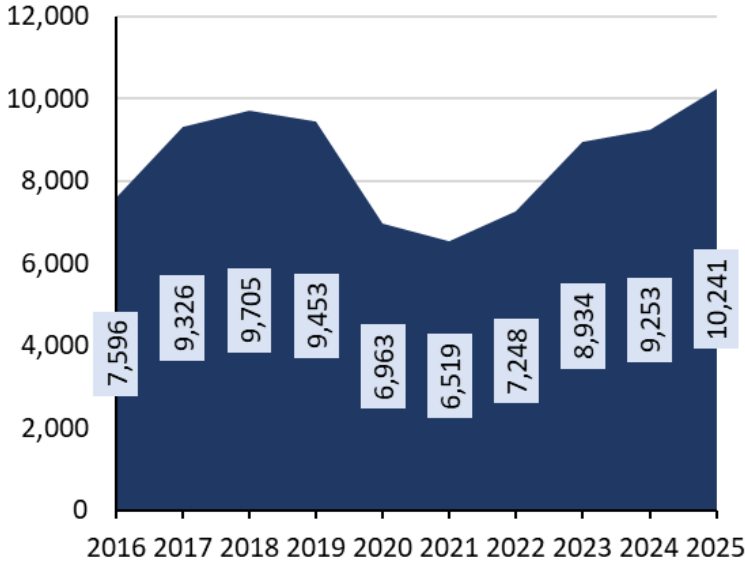
Xylazine Submissions  
CY2021-2025



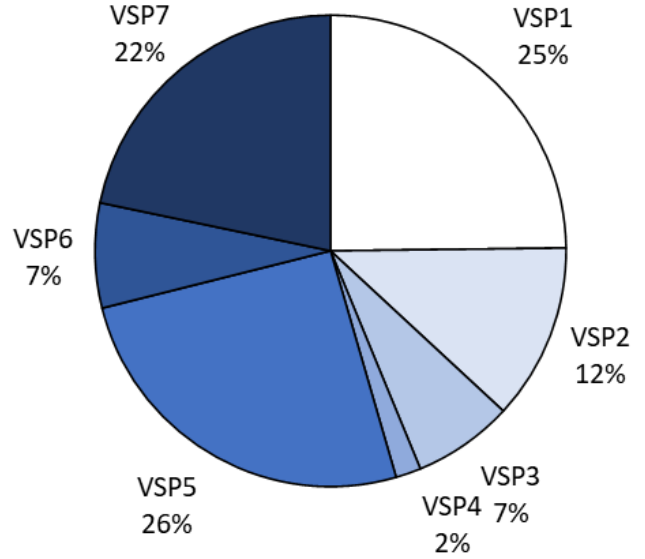
# Cocaine



Cocaine Submissions  
CY2016-2025



2025 Cocaine Submissions  
Across Virginia State Police (VSP) Divisions



Cocaine submissions to DFS are higher than any other individual drug, representing 27% of the total number of submissions to DFS in 2025.

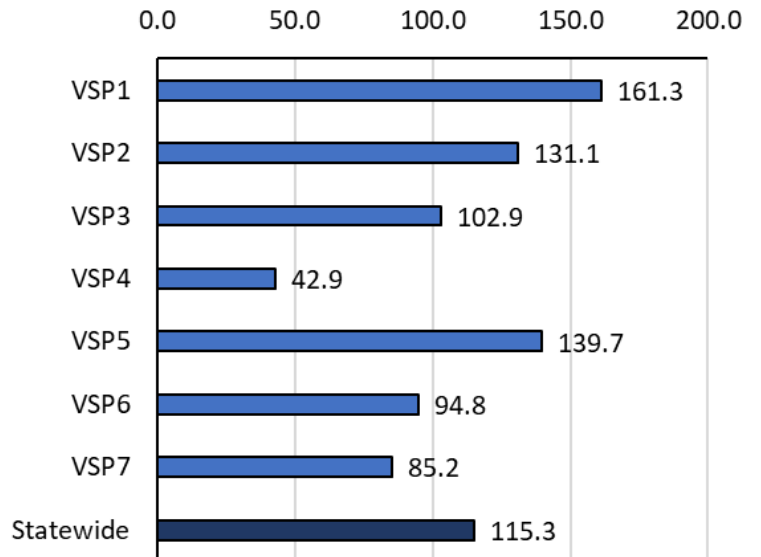
After increasing 41% between 2014 (not shown) and 2018, cocaine submissions dropped 3% in 2019, 26% in 2020, and another 6% in 2021. This trend reversed in 2022, cocaine submissions increasing each year since. Submissions increased by 11% in 2025.

VSP Divisions 1 and 5 were responsible for the highest number of cocaine submissions in 2025. The rate of submissions per 100,000 population was highest from VSP 1 and lowest from VSP 4.

Statewide, the rate of cocaine submissions in 2025 was 115.3 per 100,000 population. This was up 42% from 2020.

The maps on the following page present the changing pattern of cocaine submission rates, by Virginia Court District.

2025 Cocaine Submissions  
Rate per 100,000

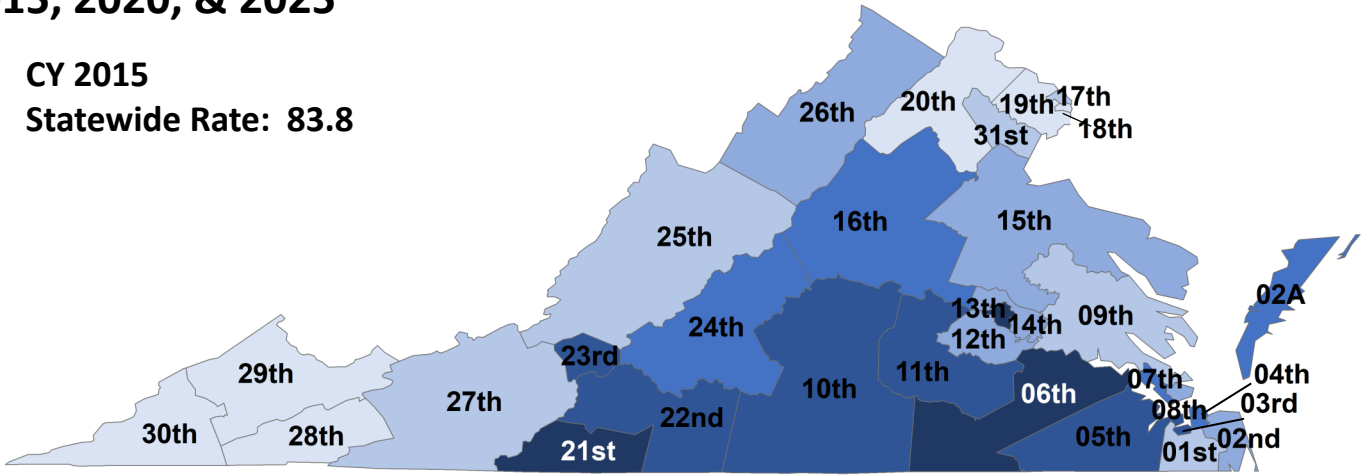


# Cocaine

## Cocaine Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

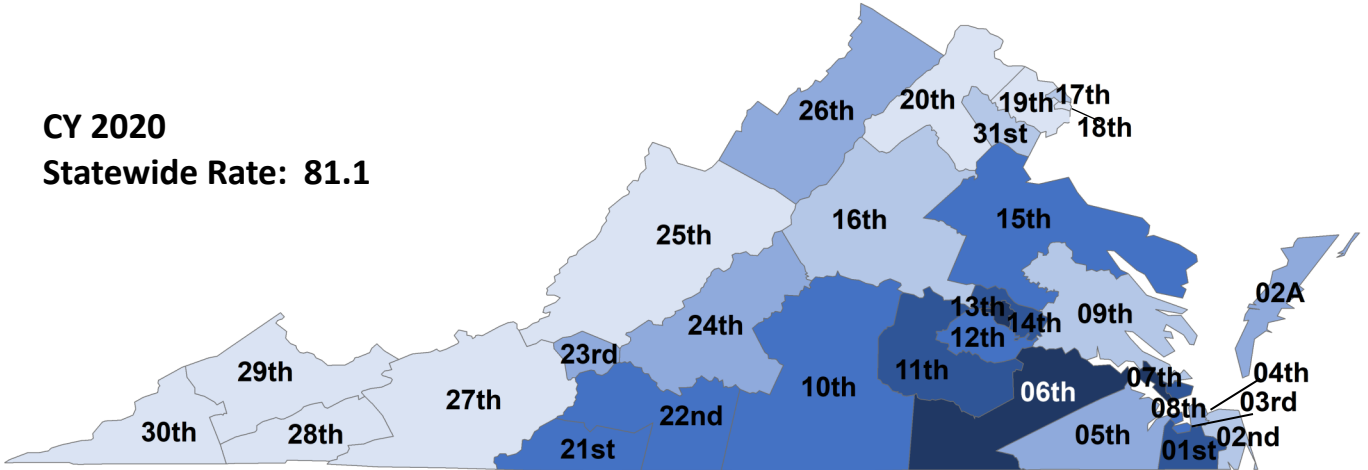
CY 2015

Statewide Rate: 83.8



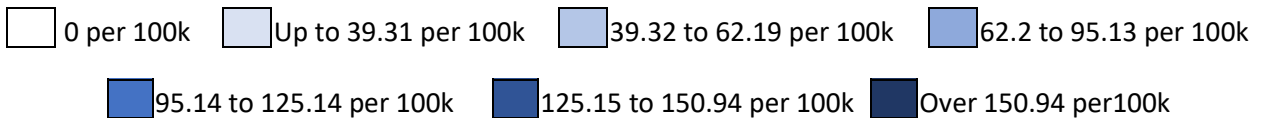
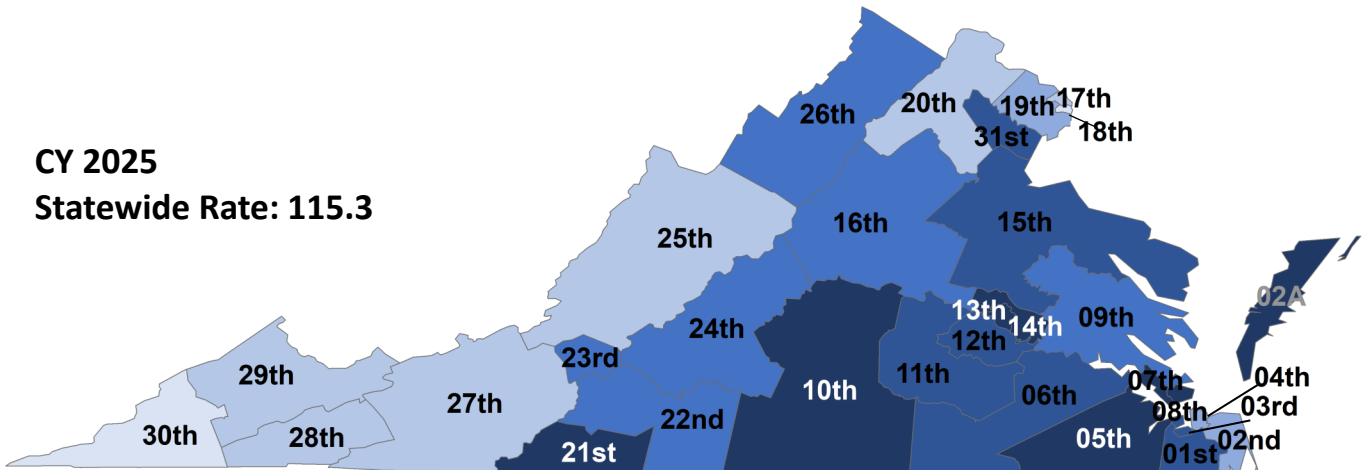
CY 2020

Statewide Rate: 81.1

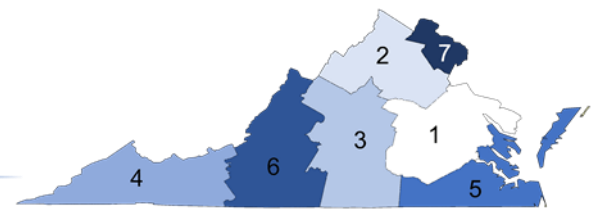


CY 2025

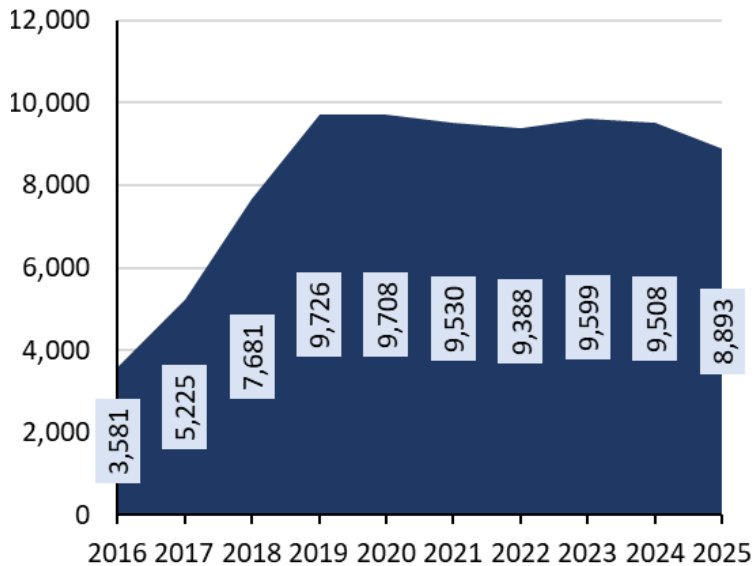
Statewide Rate: 115.3



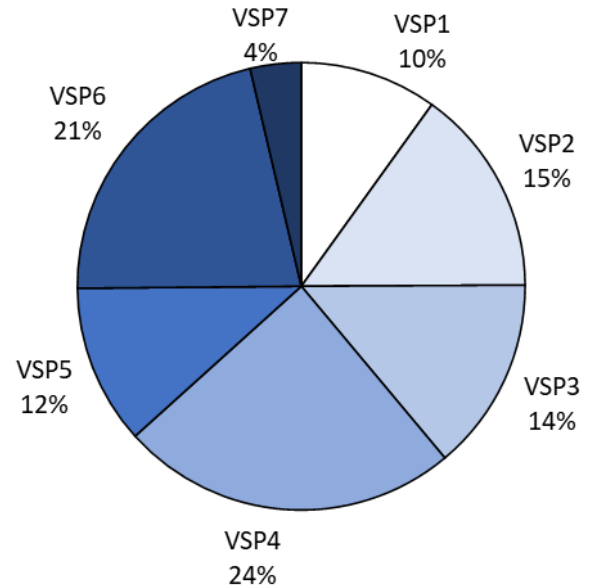
# Methamphetamine



Methamphetamine Submissions  
CY2016-2025



2025 Methamphetamine Submissions  
Across Virginia State Police (VSP) Divisions



Methamphetamine submissions to DFS are the second highest for an individual drug, representing 24% of the total number of submissions to DFS in 2025.

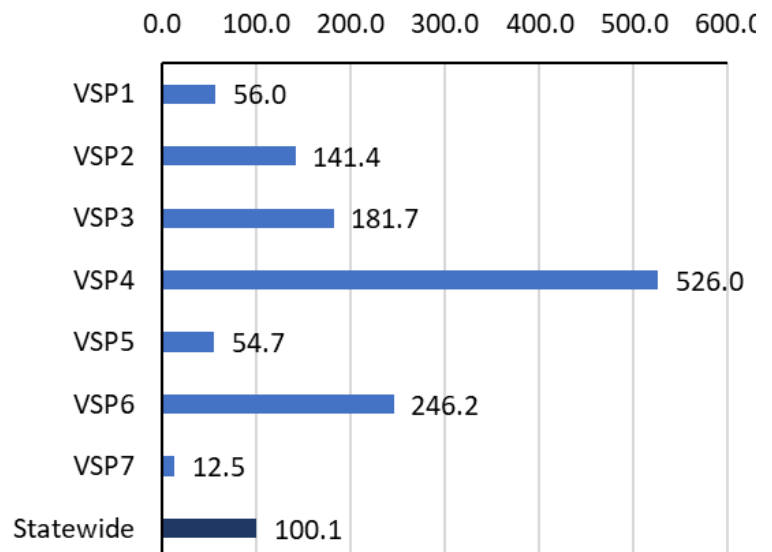
After increasing every year between 2014 (not shown) and 2019 – more than a fivefold overall increase during that time – methamphetamine submissions remained flat between 2019 and 2020. Since 2020, methamphetamine submissions have remained relatively stable: decreasing slightly every year except 2023. Submissions decreased by 6% in 2025. The large percentage increase between 2014 and 2019 is due in part to the relatively low number of submissions in 2014. In 2014, methamphetamine represented only 4% of total submissions statewide, vs. 23% in 2022.

Both the highest number and the highest rate of methamphetamine submissions in 2025 were from VSP 4 and VSP 6.

Statewide, the rate of methamphetamine submissions in 2025 was 100.1 per 100,000 population. This was down 11% from 2020.

The maps on the following page present the changing pattern of methamphetamine submission rates, by Virginia Court District.

2025 Methamphetamine Submissions  
Rate per 100,000

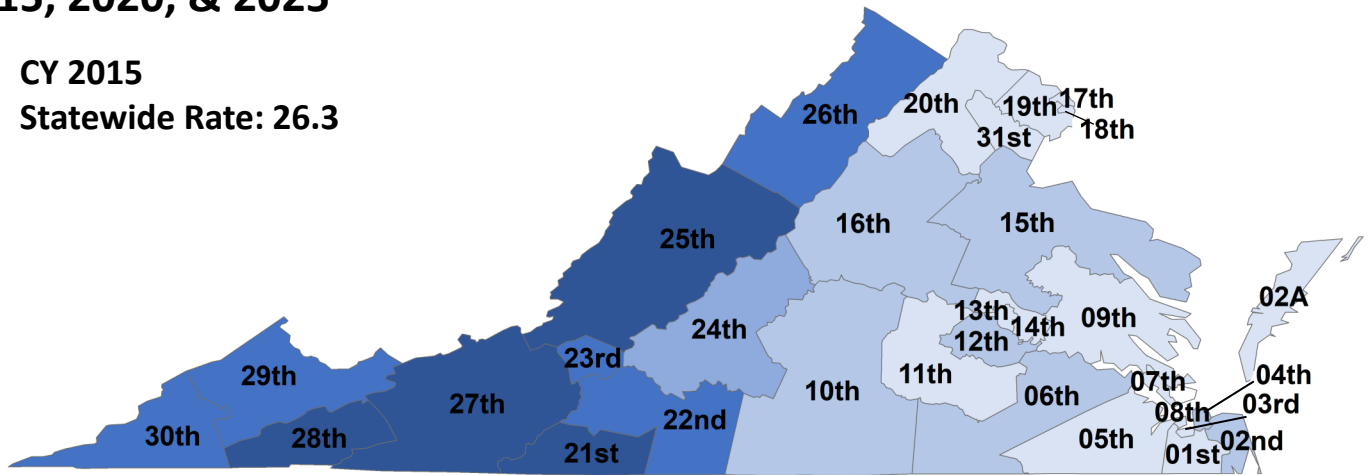


# Methamphetamine

## Methamphetamine Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

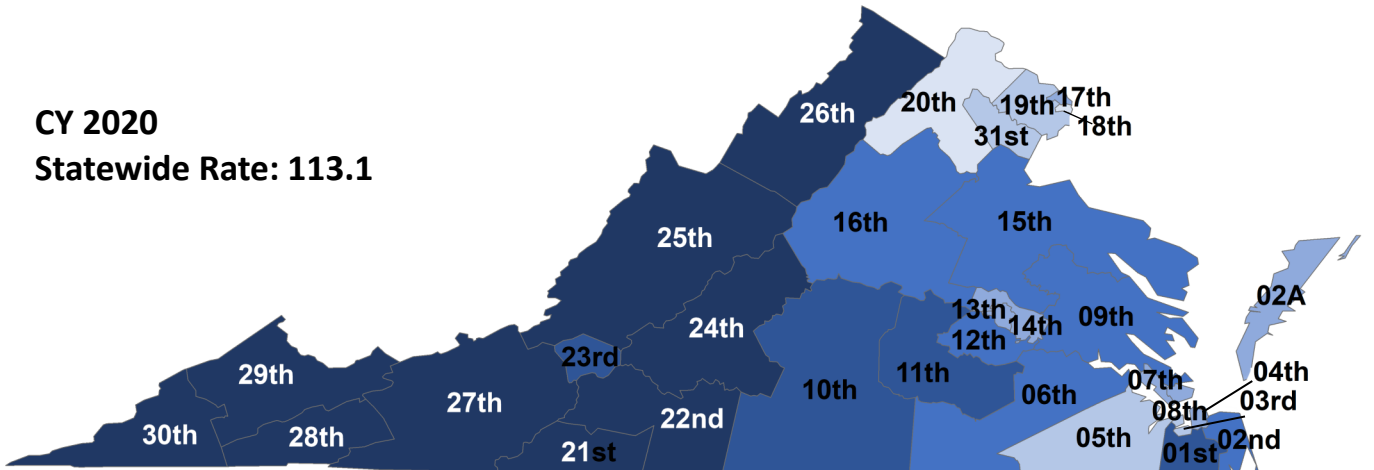
CY 2015

Statewide Rate: 26.3



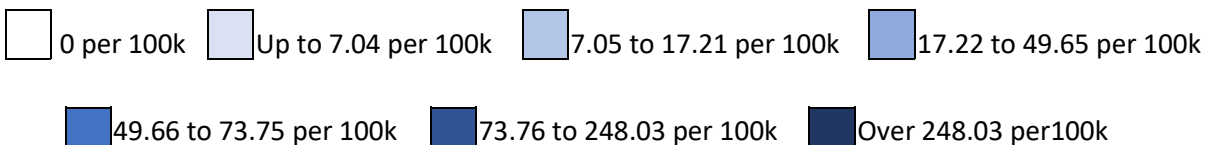
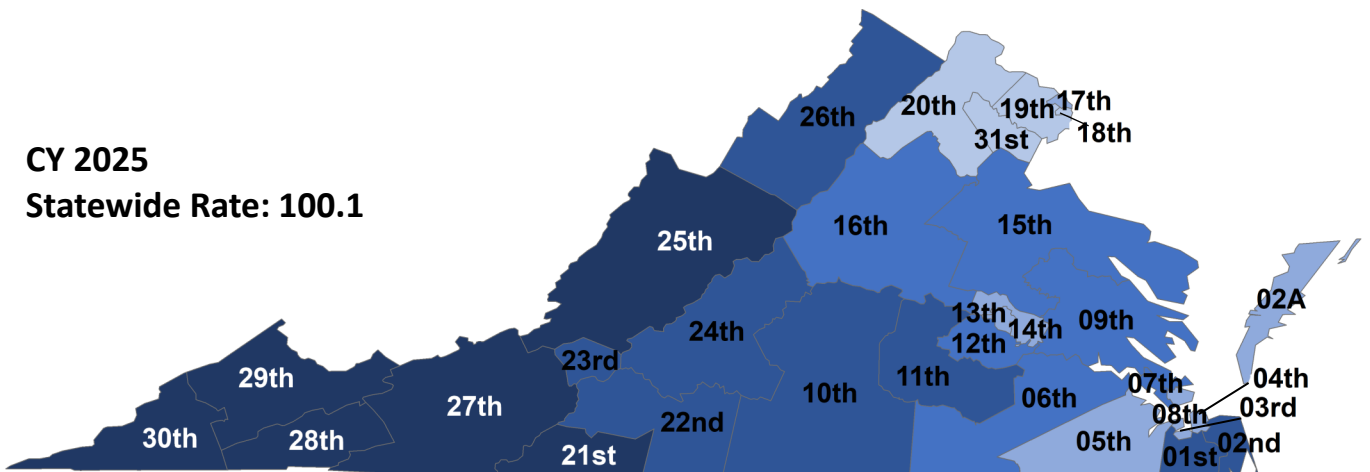
CY 2020

Statewide Rate: 113.1

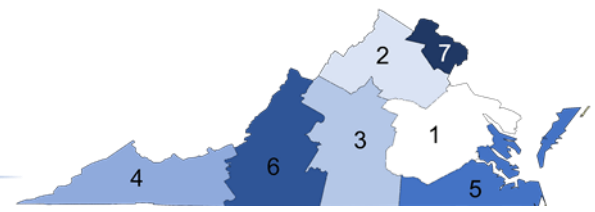


CY 2025

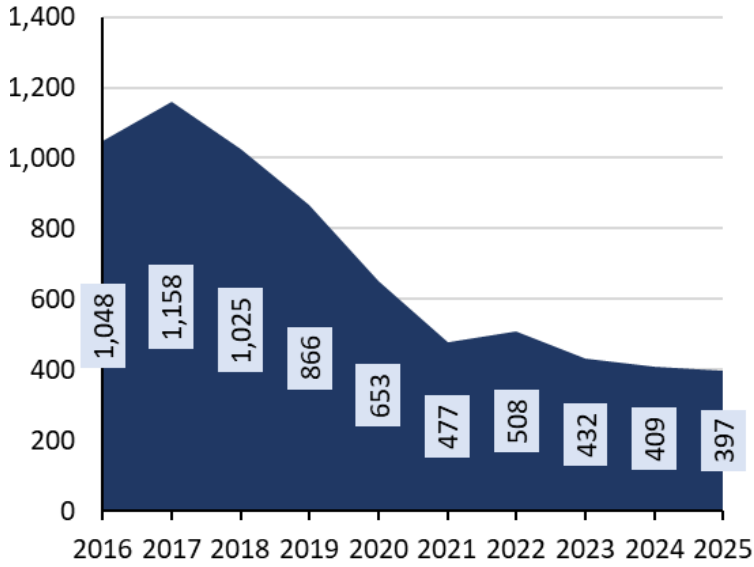
Statewide Rate: 100.1



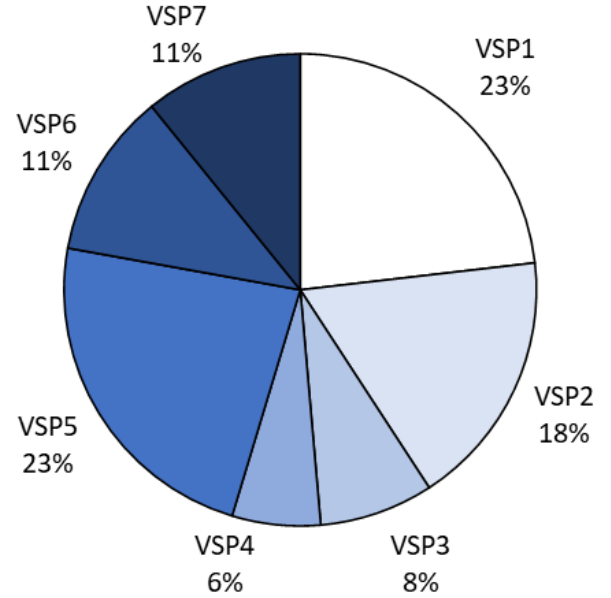
# Prescription Stimulants



Prescription Stimulant Submissions  
CY2016-2025



2025 Prescription Stimulant Submissions  
Across Virginia State Police (VSP) Divisions



Prescription Stimulants Identified\*

Substance Identified	CY2017-19	CY2020-22	CY2023-25
Amphetamine	2,446	1,371	1,173
Methylphenidate	371	161	124
Lisdexamfetamine	276	121	86
Other	71	46	36

\*Sum of individual substances will not match the total, as some cases involved more than one prescription stimulant.

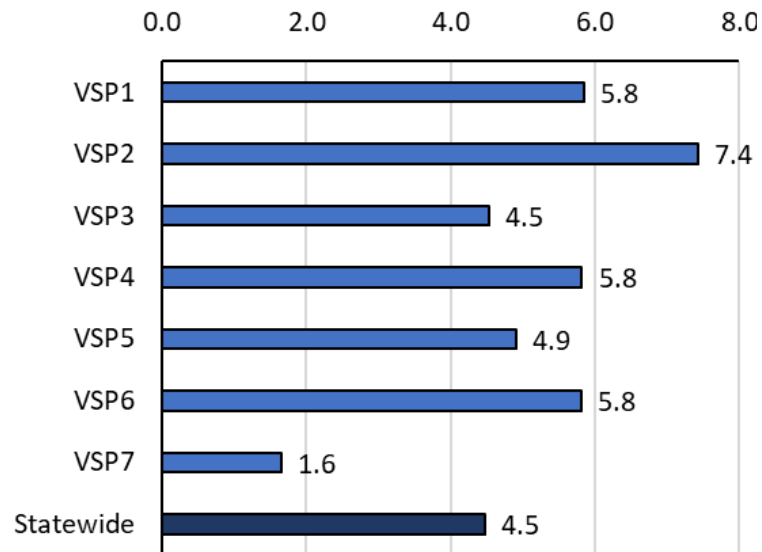
Prescription stimulants are submitted to DFS less frequently than the illicit stimulants cocaine and methamphetamine, representing only 1% of total drug submissions in 2025.

After increasing 29% between 2014 (not shown) and 2017, prescription stimulant submissions dropped every year until 2021, 59% overall. Prescription stimulant submissions increased 6% in 2022, then decreased 15% in 2023, 5% in 2024, and 3% in 2025.

The most common prescription stimulant identified in substances submitted to DFS is amphetamine, frequently prescribed for attention deficit/hyperactivity disorder. Detailed ten-year trends on prescription stimulants are provided in Appendix B.

VSP Division 1 and 5 were responsible for the highest number of prescription stimulant submissions in 2025. The rate of submissions per 100,000 population was highest from VSP 2.

2025 Prescription Stimulant Submissions  
Rate per 100,000



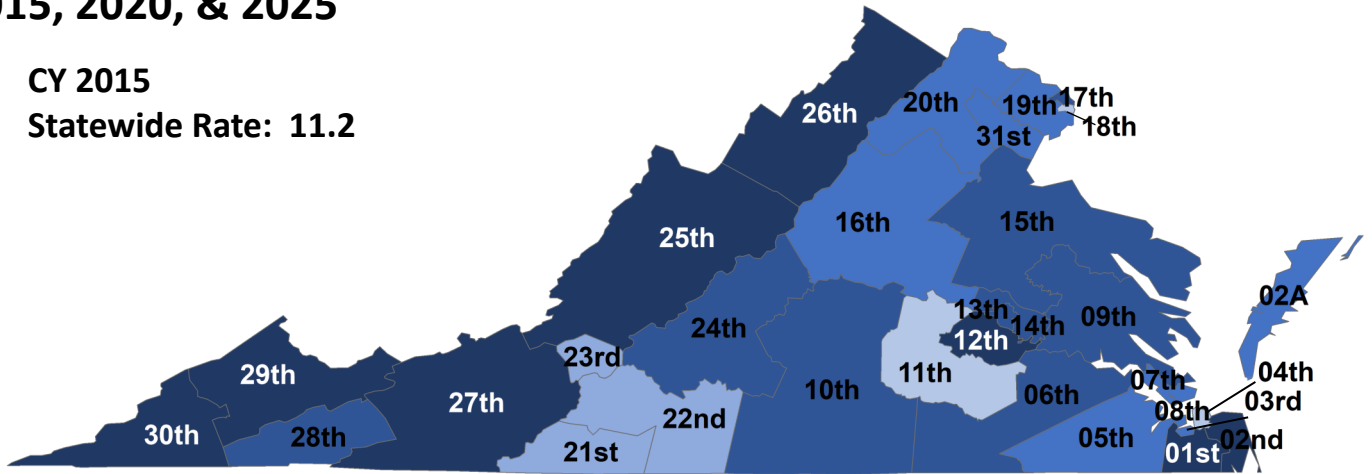
Statewide, the rate of prescription stimulant submissions in 2025 was 4.5 per 100,000. This was down 41% from 2020.

The maps on the next page show the changing pattern of prescription stimulant submission rates, by Virginia Court District.

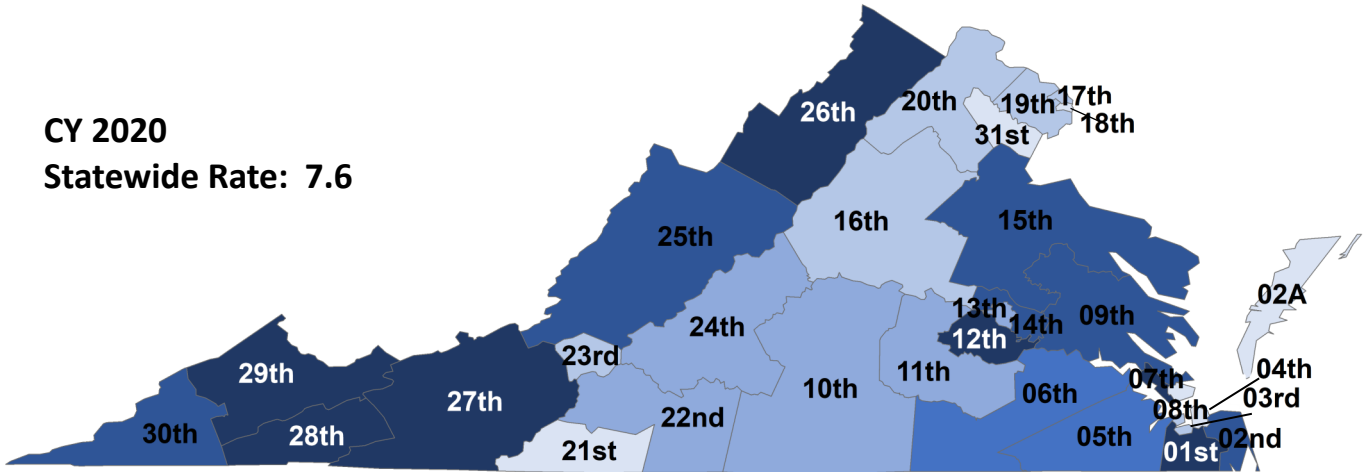
# Prescription Stimulants

## Prescription Stimulant Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

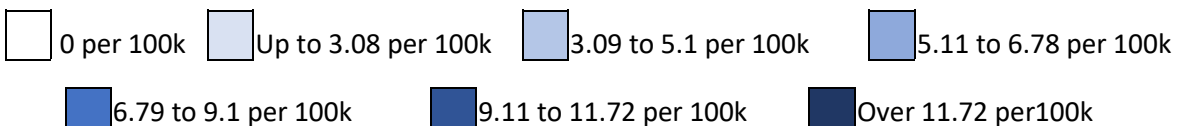
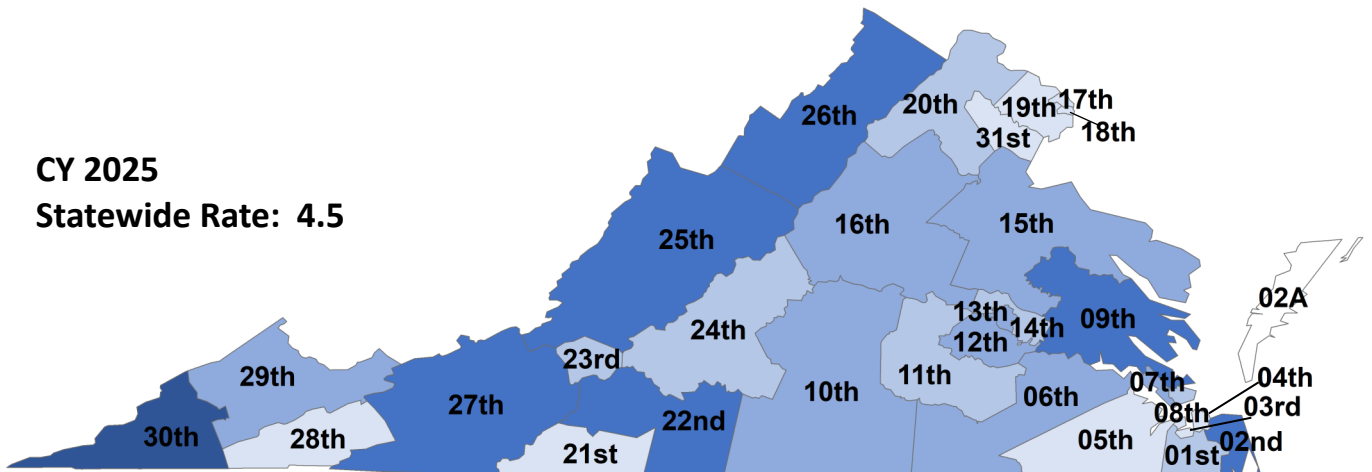
CY 2015  
Statewide Rate: 11.2



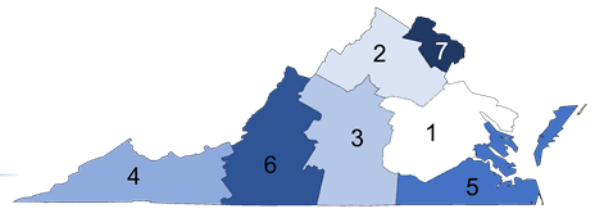
CY 2020  
Statewide Rate: 7.6



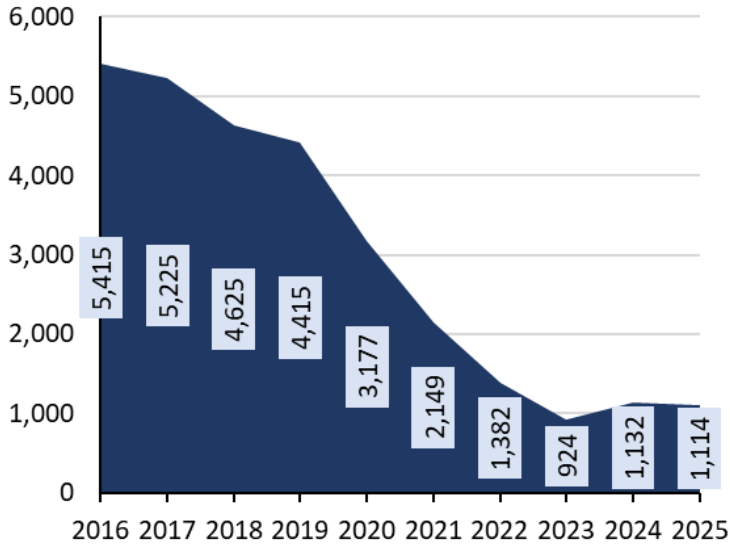
CY 2025  
Statewide Rate: 4.5



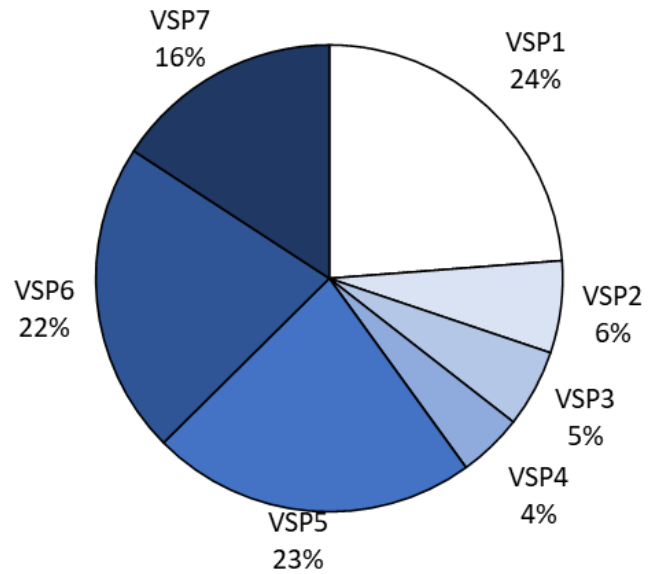
# Heroin



Heroin Submissions  
CY2016-2025



2025 Heroin Submissions  
Across Virginia State Police (VSP) Divisions



Heroin submissions to DFS represented 3% of total drug submissions in 2025.

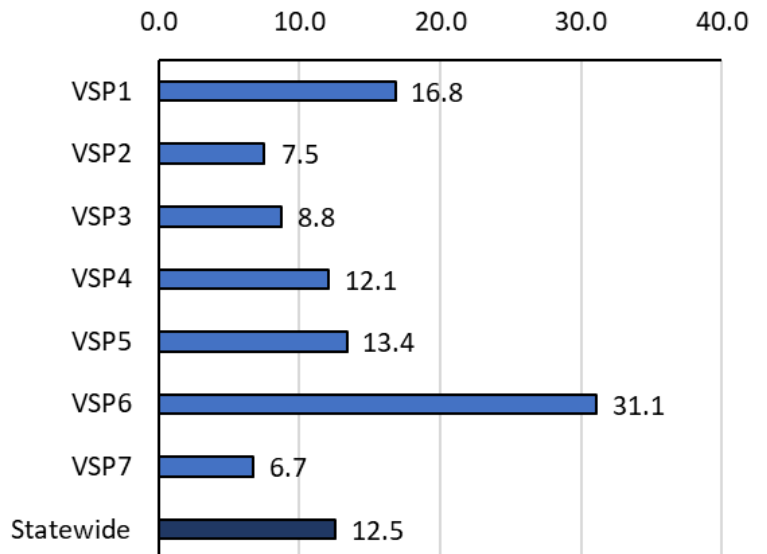
After peaking in 2016, heroin submissions dropped steadily each year from 2016 to 2023. Heroin submissions dropped 33% between 2022 and 2023, to the lowest level in a decade. This trend reversed in 2024, raising by 23% then decreasing by 2% in 2025.

VSP Division 1 was responsible for the highest number of heroin submissions in 2025. The rate of submissions per 100,000 population was highest from VSP 6.

Statewide, the rate of heroin submissions in 2025 was 12.5 per 100,000 population. This was down 66% from 2020.

The maps on the following page present the changing pattern of heroin submission rates, by Virginia Court District.

2025 Heroin Submissions  
Rate per 100,000

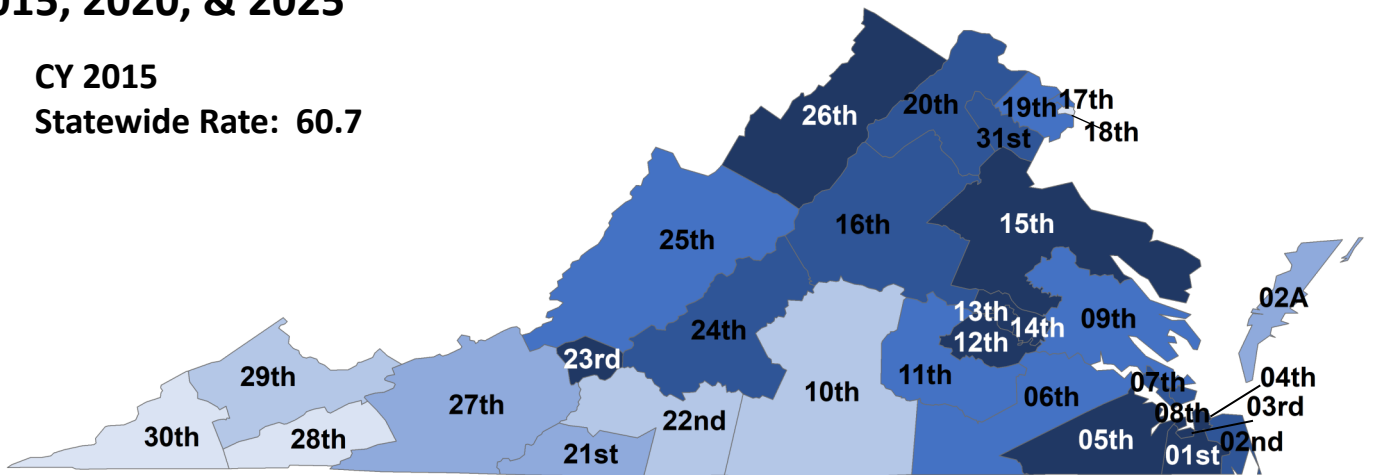


# Heroin

## Heroin Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

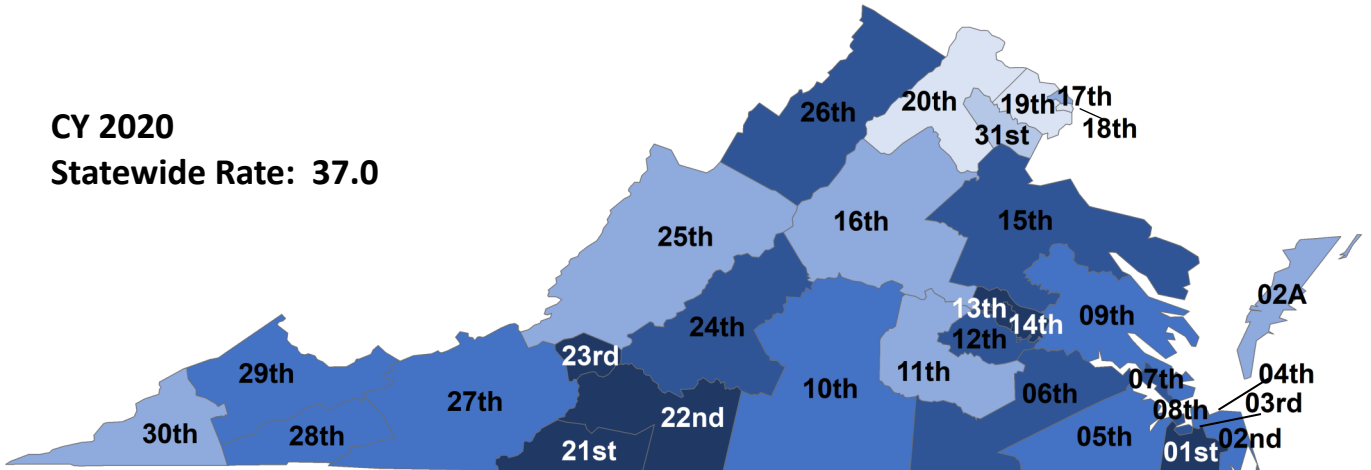
CY 2015

Statewide Rate: 60.7



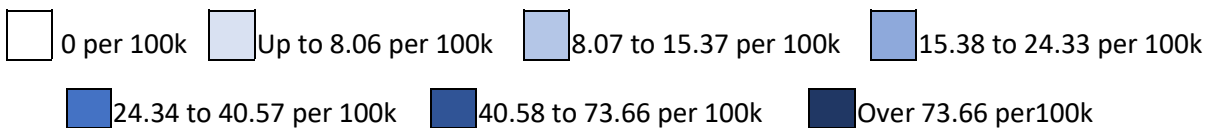
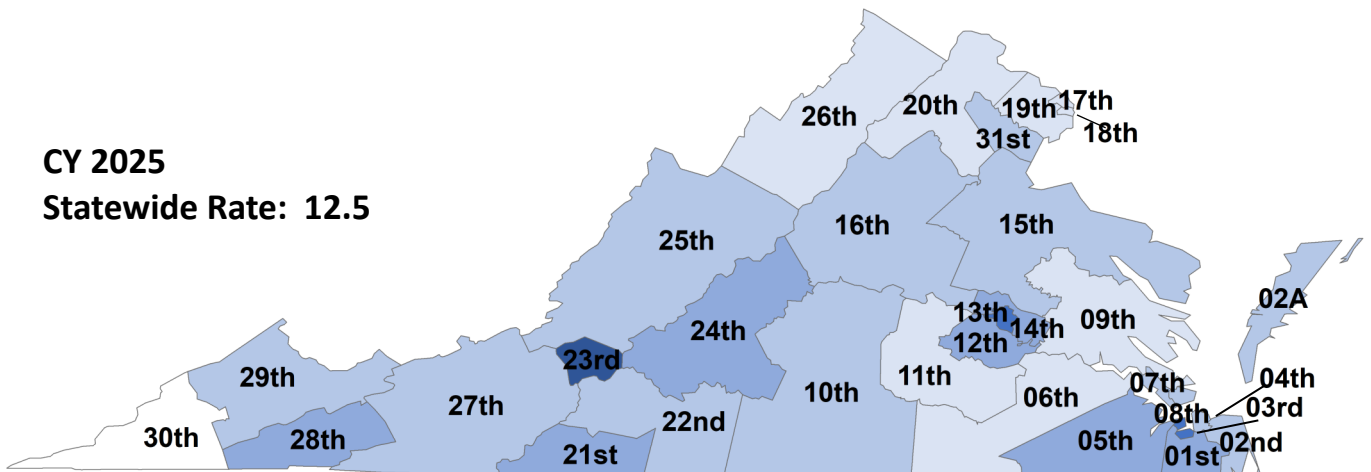
CY 2020

Statewide Rate: 37.0

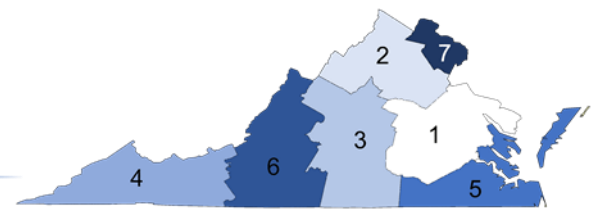


CY 2025

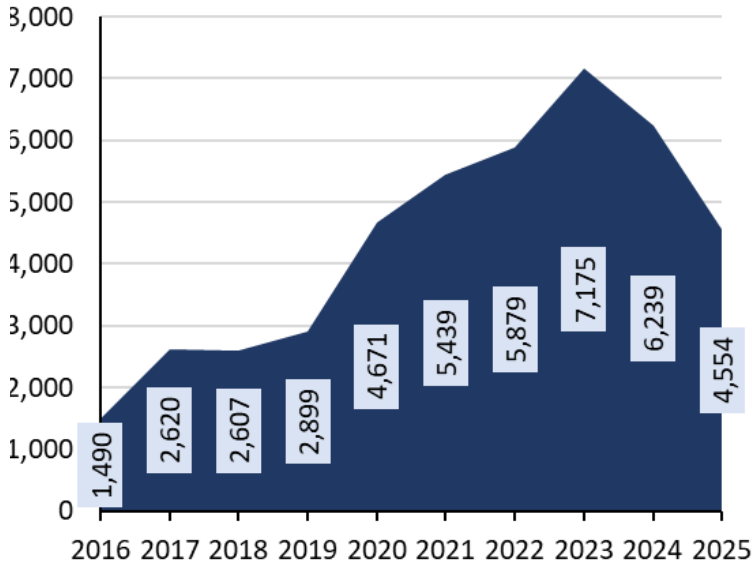
Statewide Rate: 12.5



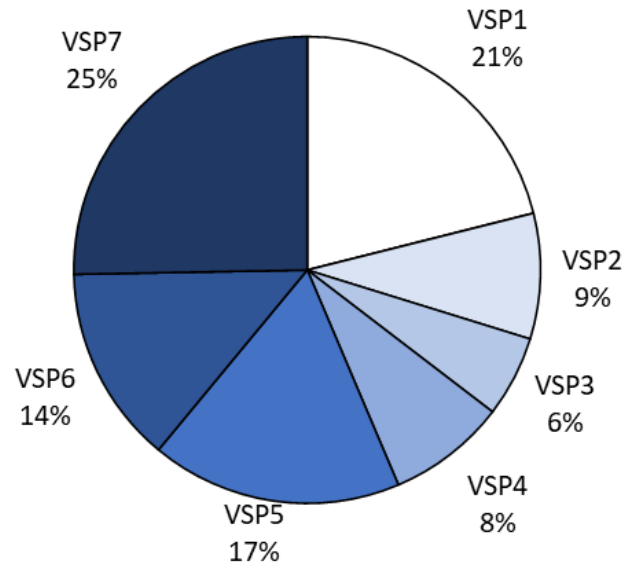
# Illicit Synthetic Opioids



Illicit Synthetic Opioid Submissions  
CY2016-2025



2025 Illicit Synthetic Opioid Submissions  
Across Virginia State Police (VSP) Divisions



Illicit Synthetic Opioids Identified\*

Substance Identified	CY2017-19	CY2020-22	CY2023-25
Fentanyl	6,866	15,645	19,621
<b>Fentanyl Analogs</b>			
Para-Fluorofentanyl	0	1,217	1,157
Acetyl Fentanyl	429	204	90
FIBF	594	9	0
Furanyl Fentanyl	563	1	0
Fentanyl Analog - Other**	254	42	161
Nitazenes	0	63	51
Other Illicit Synthetic Opioids**	338	115	49

\*Sum of individual substances will not match the total, as some cases involved more than one illicit synthetic opioid.

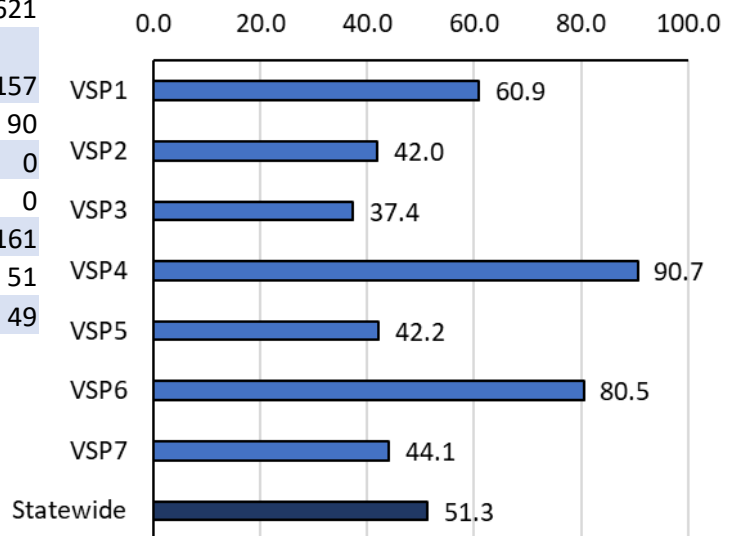
\*\*See Appendix C for compound list.

Illicit synthetic opioids have become the most frequently submitted category of opioid drugs submitted to DFS, surpassing both heroin and prescription opioids, combined. In 2025, illicit synthetic opioids represented 12% of total drug submissions.

Illicit synthetic opioid submissions increased steadily every year between 2011 (not shown) and 2023, excepting 2018. This upwards trend reversed in 2024, as submissions decreased by 13% and continued to decrease by 27% in 2025.

The most common illicit synthetic opioid identified in substances submitted to DFS is illicitly produced fentanyl. (Fentanyl is also available as a prescription medication; prescription fentanyl submissions are counted with other prescription opioids in this re-

2025 Illicit Synthetic Opioid Submissions  
Rate per 100,000



port.) Detailed ten-year trends on individual illicit synthetic opioids are provided in Appendix B.

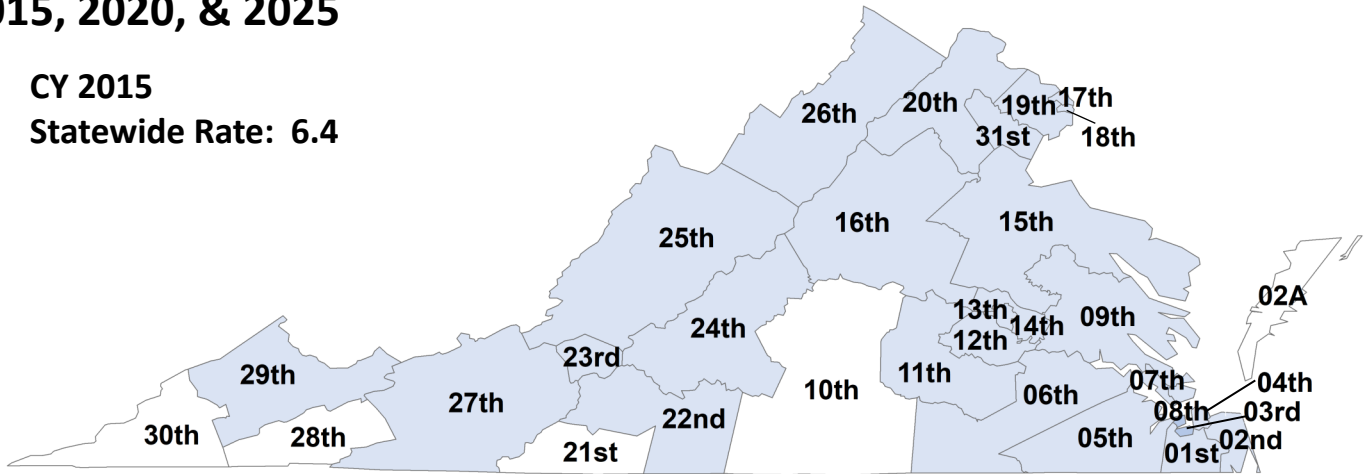
VSP Division 7 was responsible for the highest number of illicit synthetic opioid submissions in 2025. The rate of submissions per 100,000 population was highest from VSP 4.

Statewide, the rate of illicit synthetic opioid submissions in 2025 was 51.3 per 100,000. This was down 6% from 2020. The maps on the following page present the changing pattern of illicit synthetic opioid submission rates, by Virginia Court District.

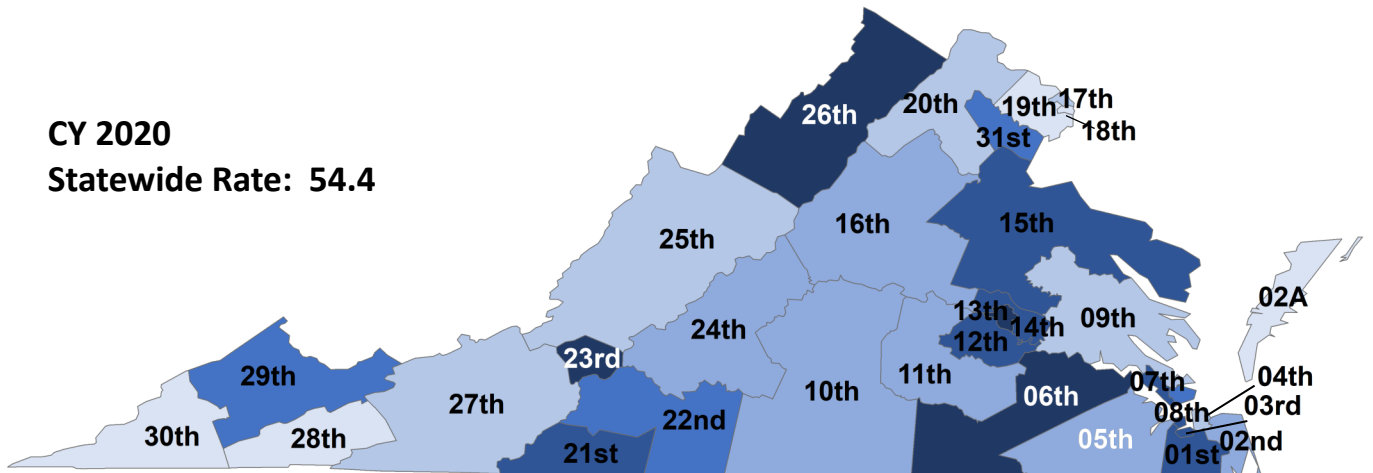
# Illicit Synthetic Opioids

## Illicit Synthetic Opioid Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

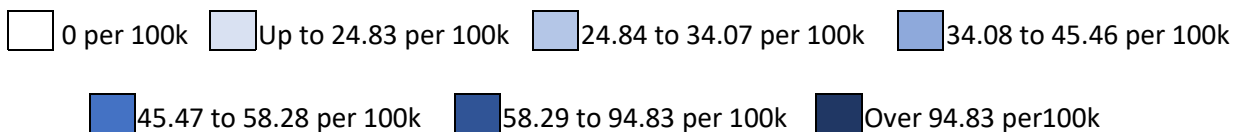
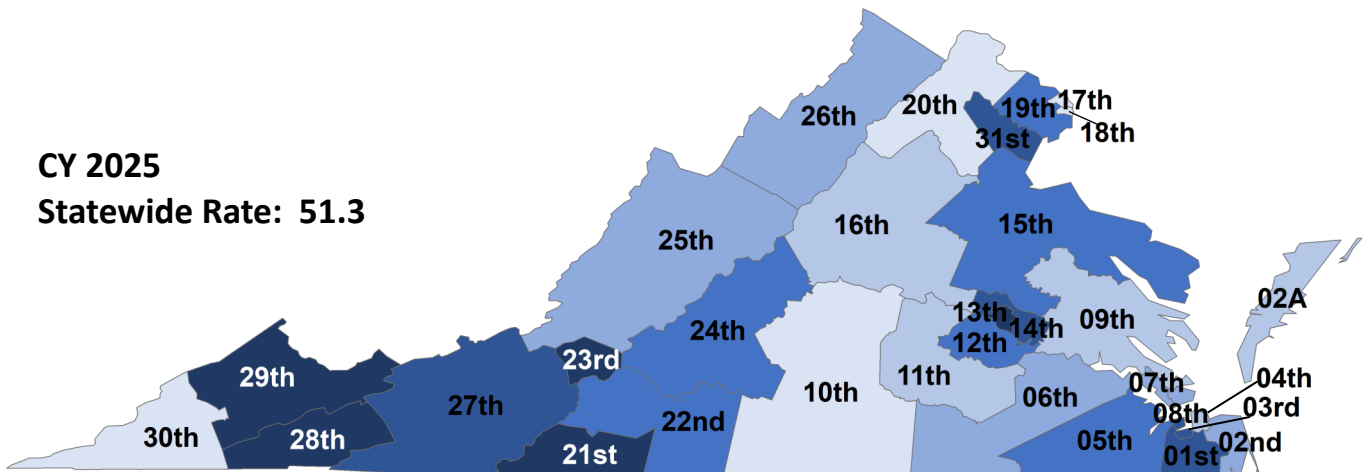
CY 2015  
Statewide Rate: 6.4



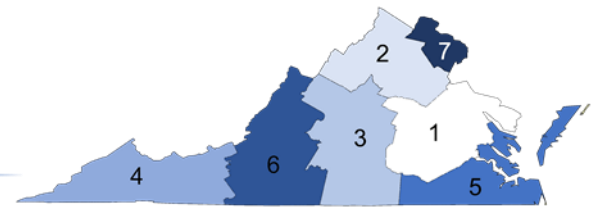
CY 2020  
Statewide Rate: 54.4



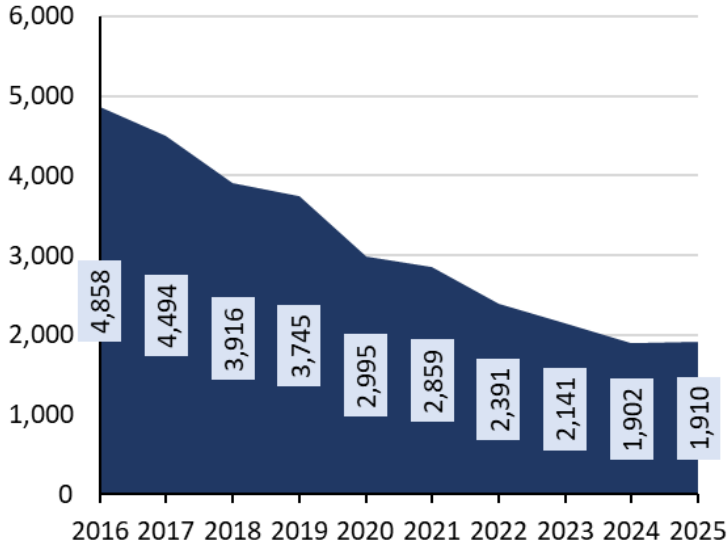
CY 2025  
Statewide Rate: 51.3



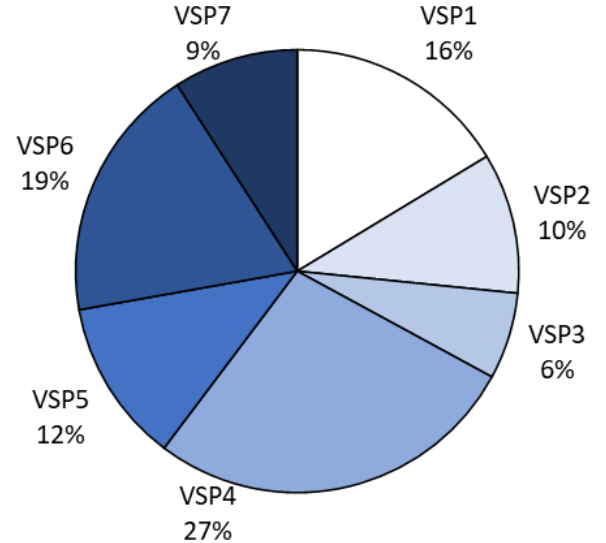
# Prescription Opioids



Prescription Opioid Submissions  
CY2016-2025



2025 Prescription Opioid Submissions  
Across Virginia State Police (VSP) Divisions



Prescription Opioids Identified\*

Substance Identified	CY2017-19	CY2020-22	CY2023-25
Buprenorphine	4,424	3,881	3,532
Oxycodone	3,992	2,016	1,952
Hydrocodone	1,940	795	703
Tramadol	828	1,325	412
Methadone	481	288	243
Morphine	590	206	154
Hydromorphone	454	166	128
Codeine	220	114	84
Other**	388	88	54

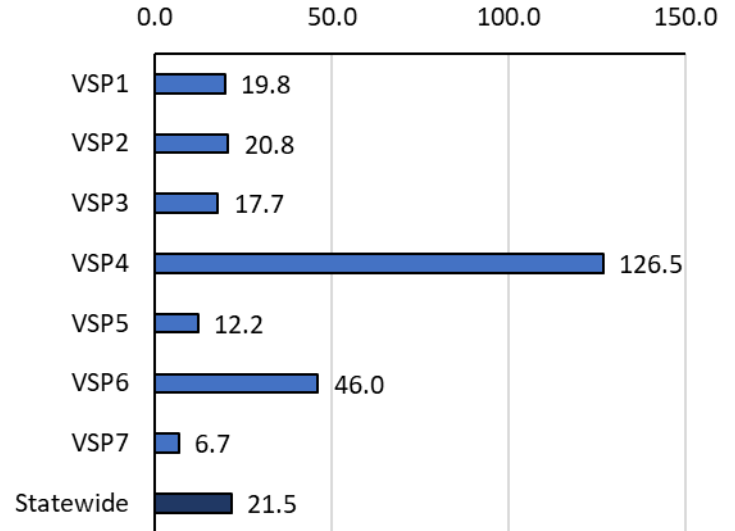
\*Sum of individual substances will not match the total, as some cases involved more than one prescription opioid.

\*\*See Appendix C for compound list.

Prescription opioid submissions to DFS represented 5% of total drug submissions in 2025. Prescription opioid submissions have decreased steadily since 2015. Submissions decreased 11% in 2024, and didn't change from 2024 to 2025.

The most common prescription opioid identified in substances submitted to DFS in recent years is buprenorphine, which is frequently used in medically-assisted treatment for individuals addicted to opioids. This represents a change in trends among prescription opioid submissions, which were previously dominated by oxycodone and hydrocodone. Detailed ten-year trends on individual prescription opioids are provided in Appendix B.

2025 Prescription Opioid Submissions  
Rate per 100,000



Both the highest number and the highest rate of prescription opioid submissions in 2025 were from VSP 4.

Statewide, the rate of prescription opioid submissions in 2025 was 21.5 per 100,000. This was down 38% from 2020.

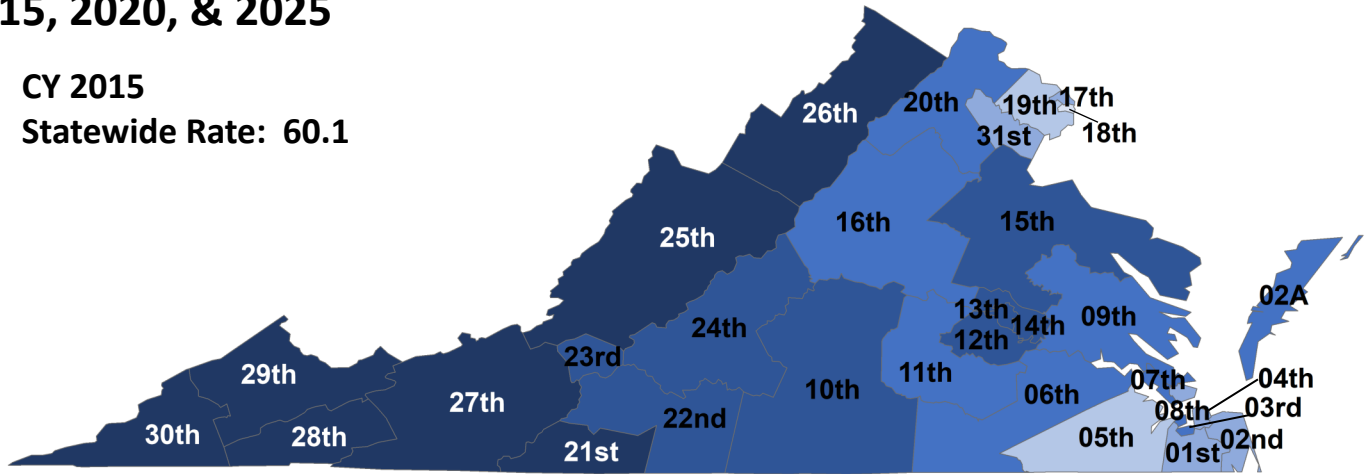
The maps on the following page present the changing pattern of prescription opioid submission rates, by Virginia Court District.

# Prescription Opioids

## Prescription Opioid Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

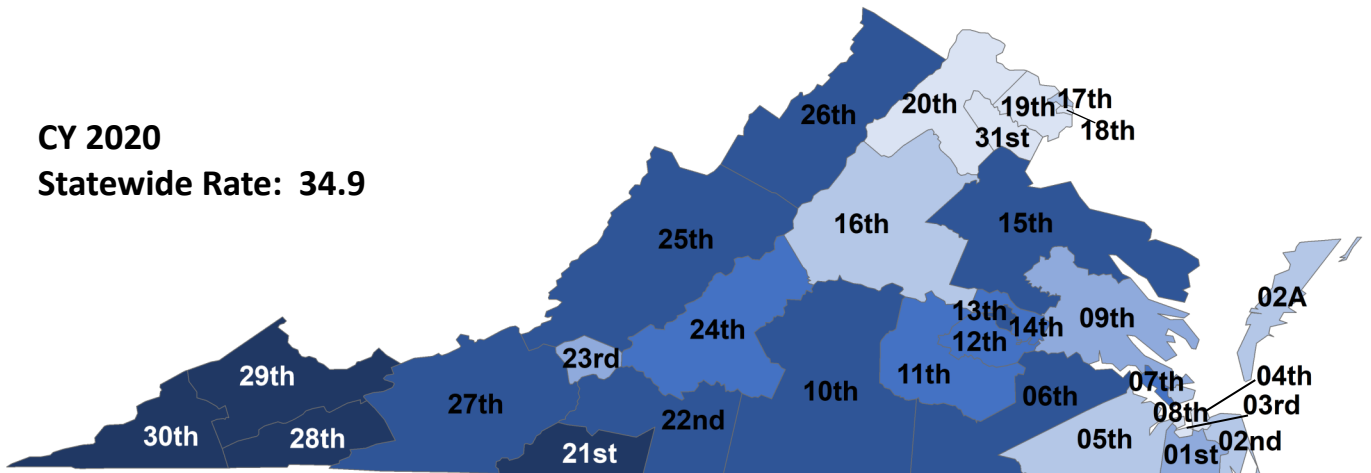
CY 2015

Statewide Rate: 60.1



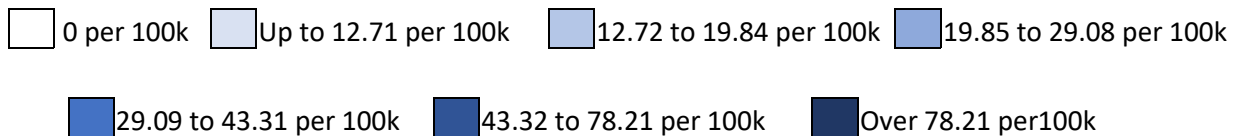
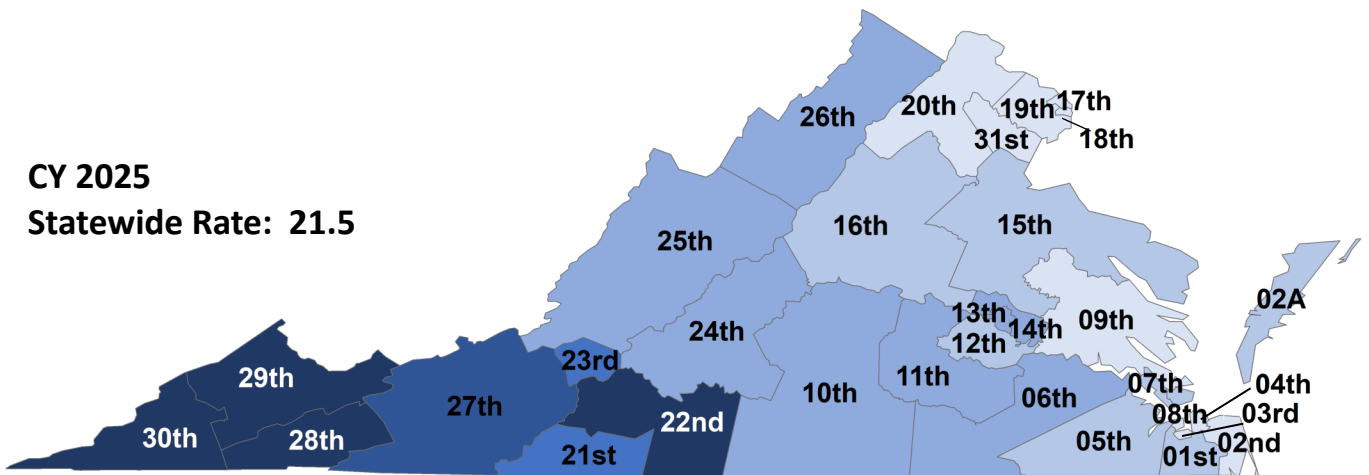
CY 2020

Statewide Rate: 34.9

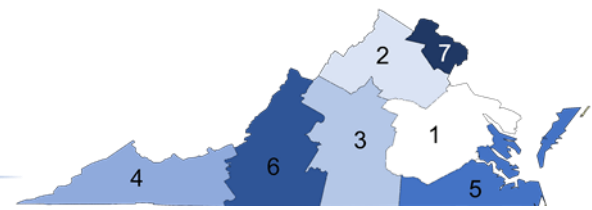


CY 2025

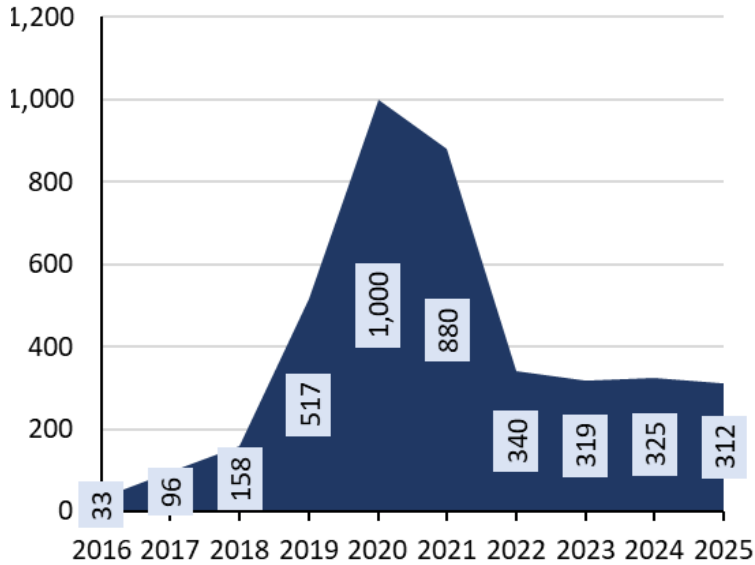
Statewide Rate: 21.5



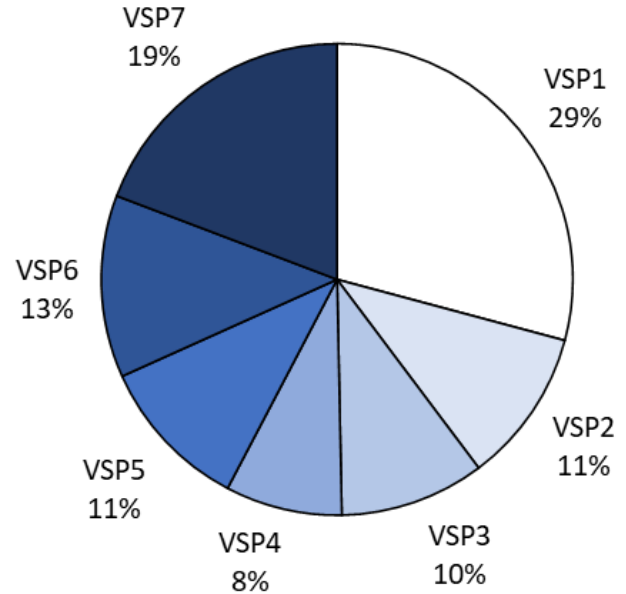
# Illicit Benzodiazepines



Illicit Benzodiazepine Submissions  
CY2016-2025



2025 Illicit Benzodiazepine Submissions  
Across Virginia State Police (VSP) Divisions



Illicit Benzodiazepines Identified\*

Substance Identified	CY2017-19	CY2020-22	CY2023-25
Bromazolam	0	160	936
Clonazolam	113	742	62
Etizolam	493	968	22
Flualprazolam	118	384	14
Other	73	134	169

\*Sum of individual substances will not match the total, as some cases involved more than one illicit benzodiazepine.

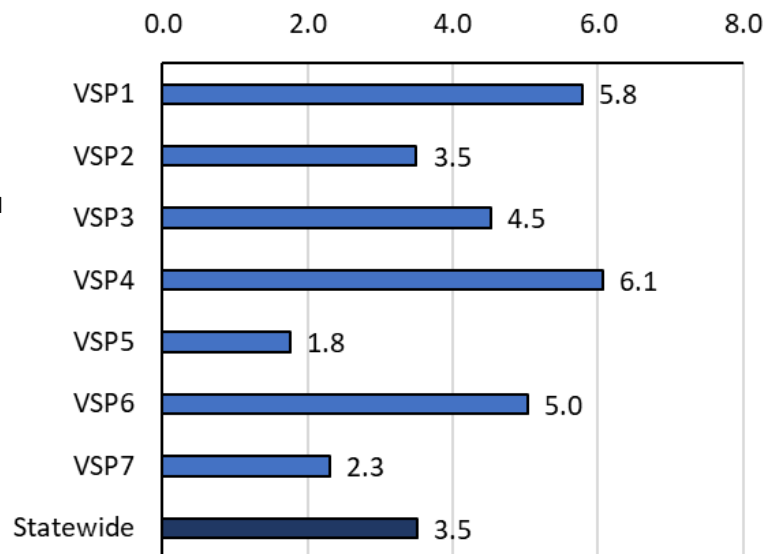
In 2020, for the first time, illicit benzodiazepines were submitted to DFS more frequently than prescription benzodiazepines. This continued in 2021, but reversed in 2022. Illicit benzodiazepines represented 1% of total drug submissions in 2025.

Between 2017 and 2020, illicit benzodiazepine submissions increased tenfold. This trend reversed in 2021, with a large drop in 2022 of 61%. Submissions have stabilized since 2022, decreasing 6% in 2023, increasing 2% in 2024, and decreasing 4% in 2025.

The most common illicit benzodiazepine identified in substances submitted to DFS between 2023 and 2025 was bromazolam. Detailed ten-year trends on individual illicit benzodiazepines are provided in Appendix B.

VSP Division 1 was responsible for the highest number of illicit benzodiazepine submissions in 2025. The rate of submissions per 100,000 population was highest from VSP 4, followed by VSP 6.

2025 Illicit Benzodiazepine Submissions  
Rate per 100,000



Statewide, the rate of illicit benzodiazepine submissions in 2025 was 3.5 per 100,000. Despite the recent decrease in cases, this statewide rate was 70% lower than the rate in 2020.

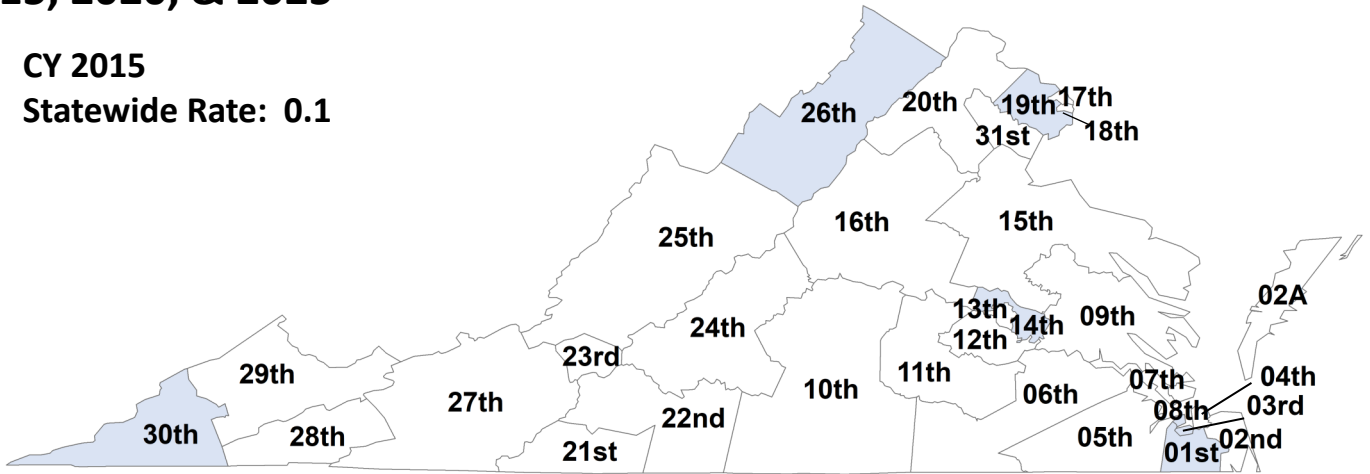
The maps on the following page present the changing pattern of illicit benzodiazepine submission rates, by Virginia Court District.

# Illicit Benzodiazepines

## Illicit Benzodiazepine Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

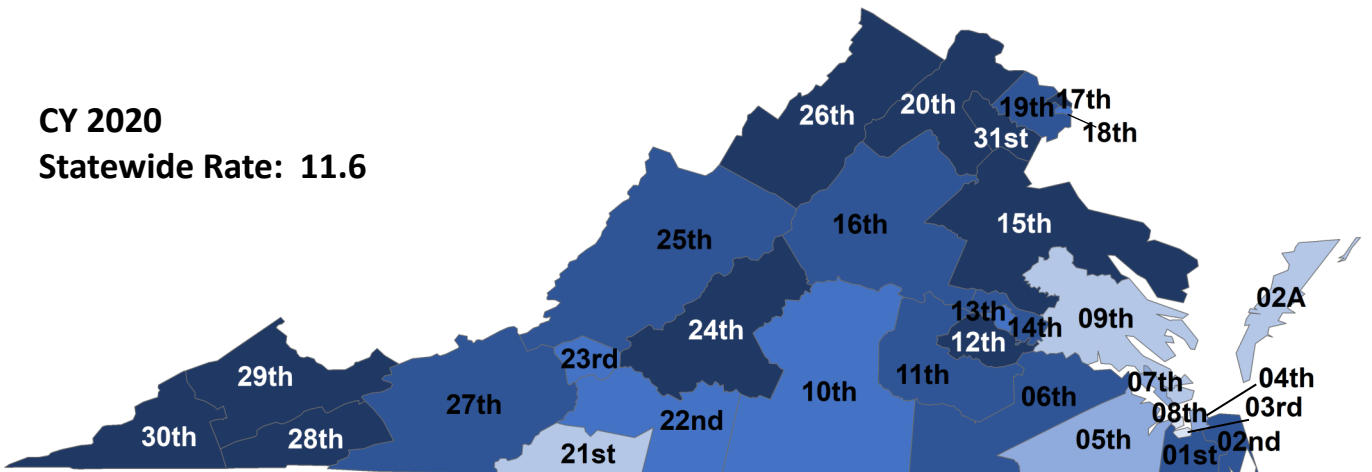
CY 2015

Statewide Rate: 0.1



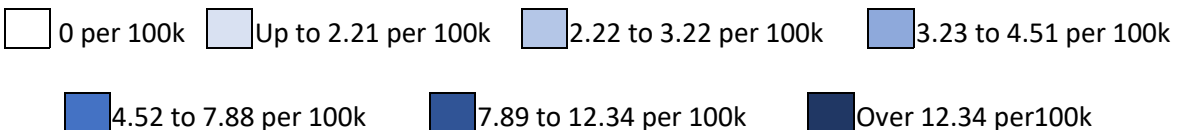
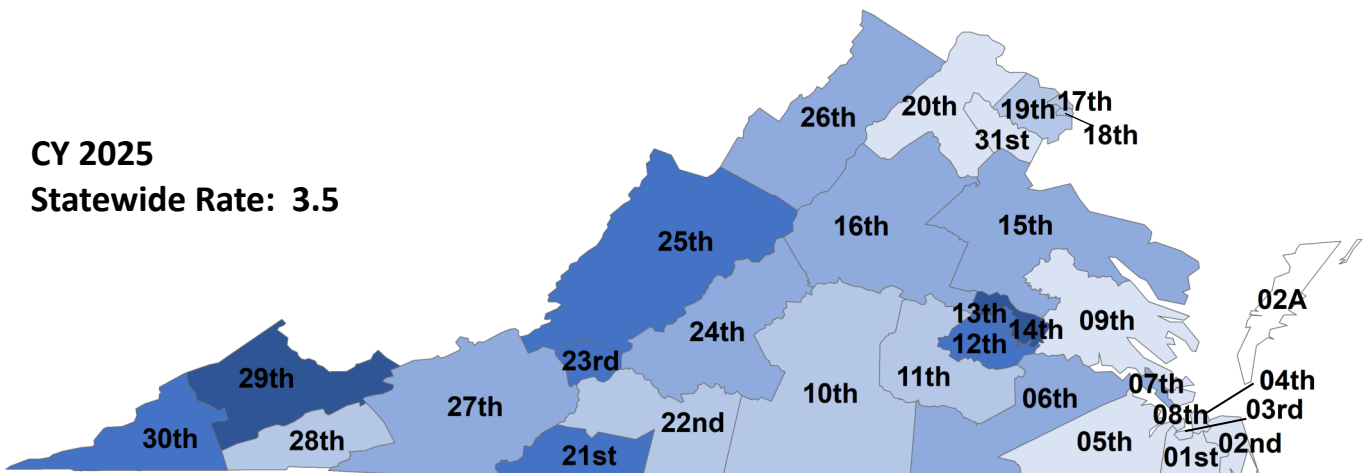
CY 2020

Statewide Rate: 11.6

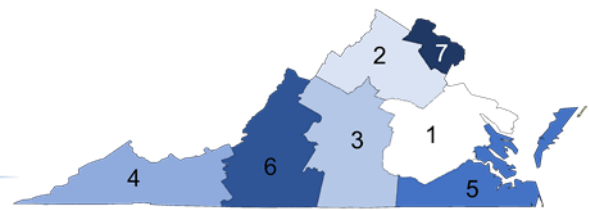


CY 2025

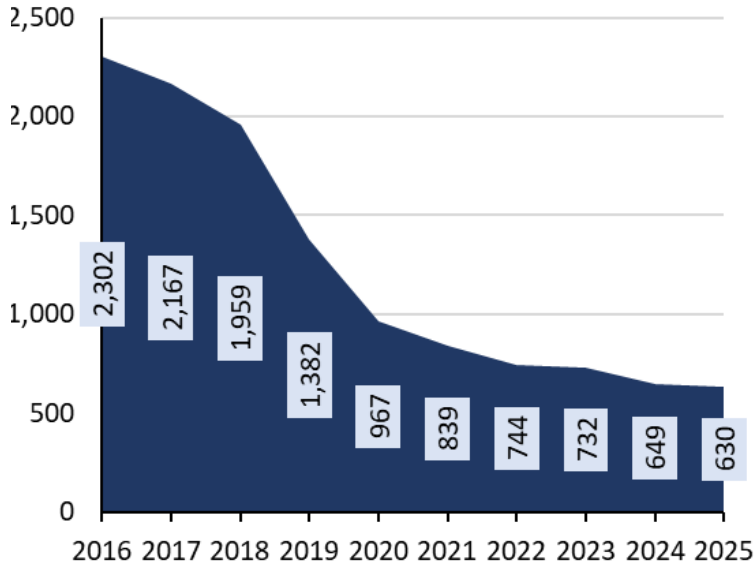
Statewide Rate: 3.5



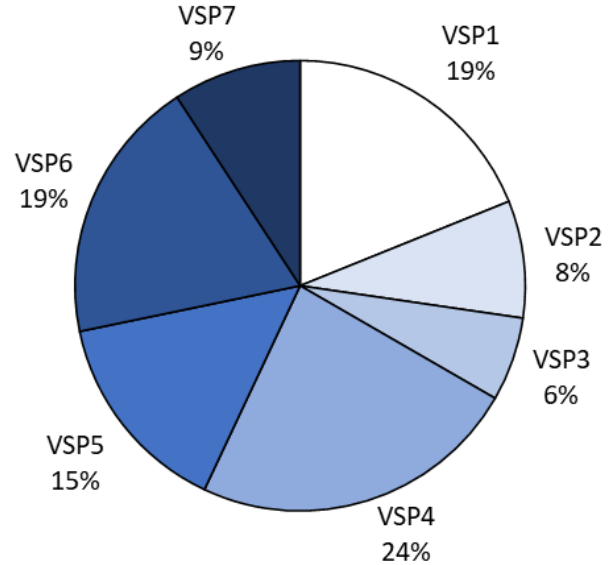
# Prescription Benzodiazepines



Prescription Benzodiazepine Submissions  
CY2016-2025



2025 Prescription Benzodiazepine Submissions  
Across Virginia State Police (VSP) Divisions



Prescription Benzodiazepines Identified\*

Substance Identified	CY2017-19	CY2020-22	CY2023-25
Alprazolam (Xanax)	3,894	1,622	1,399
Clonazepam (Klonopin)	1,262	785	727
Diazepam (Valium)	504	241	248
Lorazepam (Ativan)	297	123	130
Other	45	24	18

\*Sum of individual substances will not match the total, as some cases involved more than one prescription benzodiazepine.

In 2025, prescription benzodiazepine submissions represented 2% of total submissions.

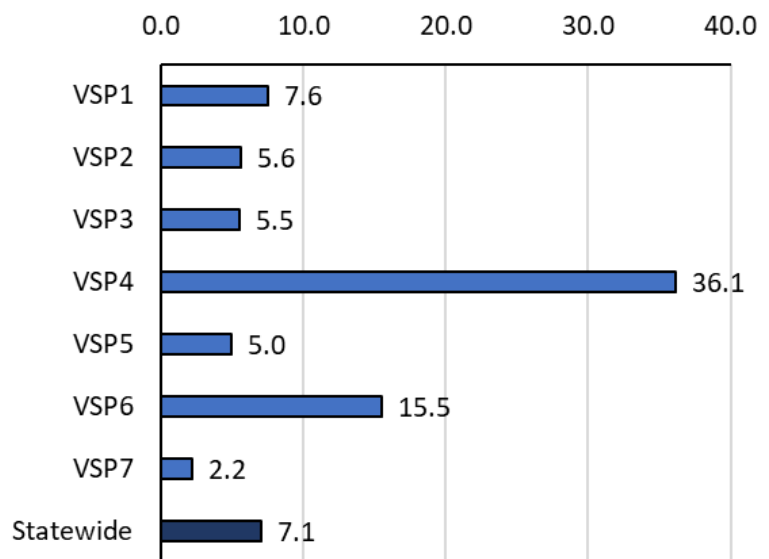
Prescription benzodiazepine submissions have decreased sharply in recent years. Submissions decreased 64% between 2016 and 2021, another 11% in 2022, and decreased another 2% in 2023. In 2024 submissions dropped sharply by 11%. This downward trend continued at a slower pace in 2025, with a decrease of 3%.

The most common prescription benzodiazepine identified in substances submitted to DFS is alprazolam. Detailed ten-year trends on individual prescription benzodiazepines are provided in Appendix B.

Both the highest number and the highest rate of prescription benzodiazepine submissions in 2025 were from VSP 4.

Statewide, the rate of prescription benzodiazepine submissions

2025 Prescription Benzodiazepine  
Submissions Rate per 100,000



in 2025 was 7.1 per 100,000. This was down 37% from 2020.

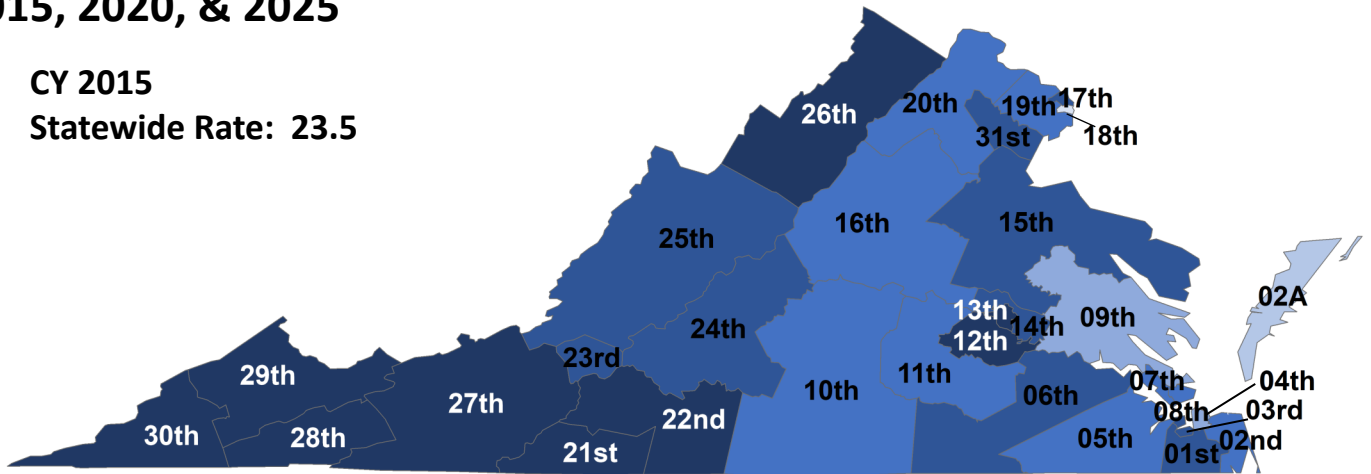
The maps on the following page present the changing pattern of prescription benzodiazepine submission rates, by Virginia Court District.

# Prescription Benzodiazepines

## Prescription Benzodiazepine Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

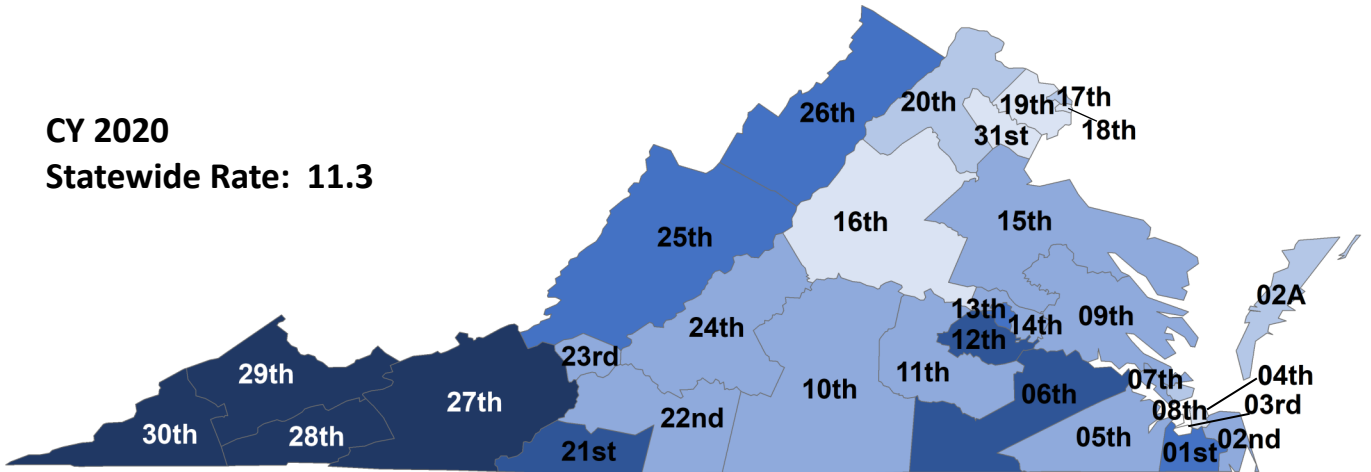
CY 2015

Statewide Rate: 23.5



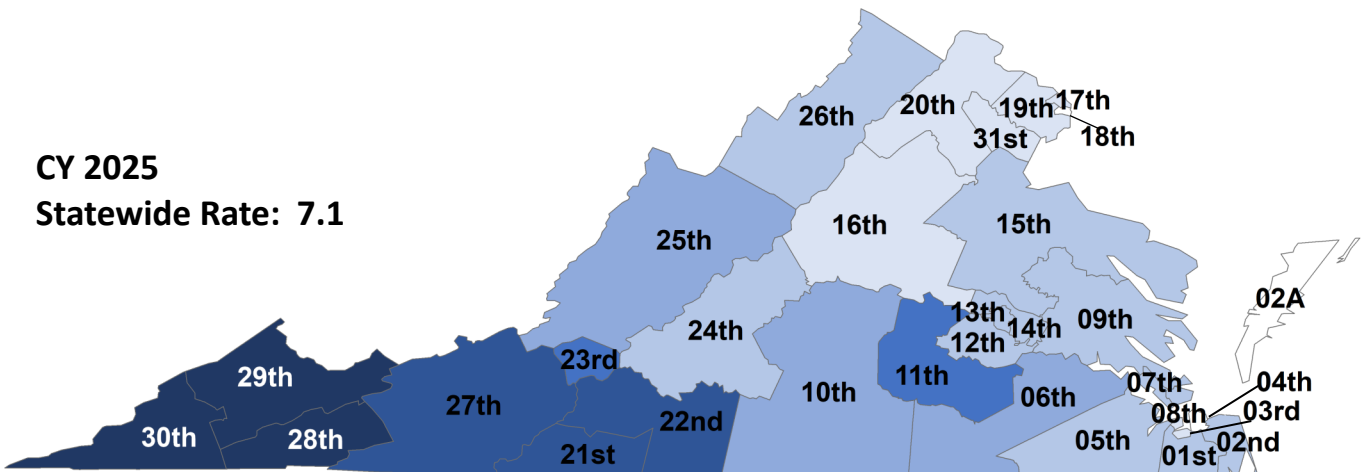
CY 2020

Statewide Rate: 11.3



CY 2025

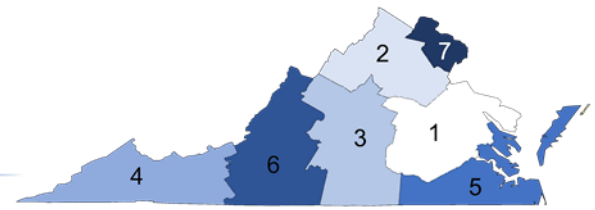
Statewide Rate: 7.1



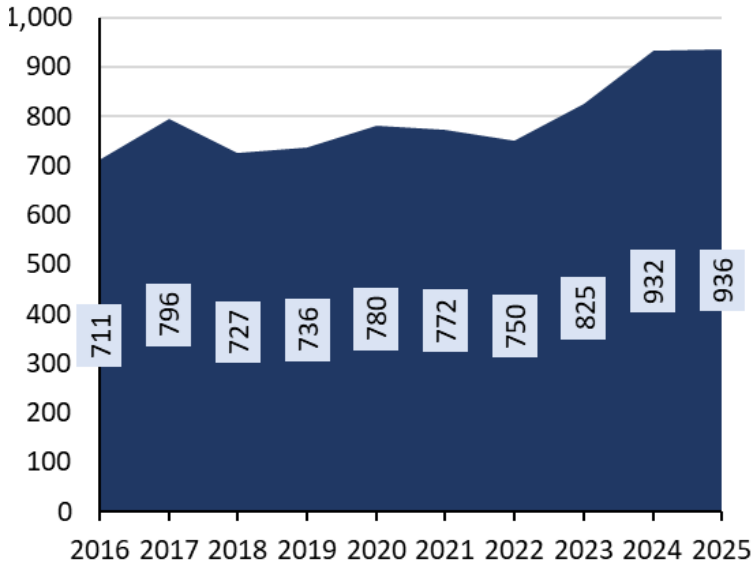
0 per 100k    Up to 4.34 per 100k    4.35 to 7.58 per 100k    7.59 to 11.91 per 100k

11.92 to 16.46 per 100k    16.47 to 27.97 per 100k    Over 27.97 per 100k

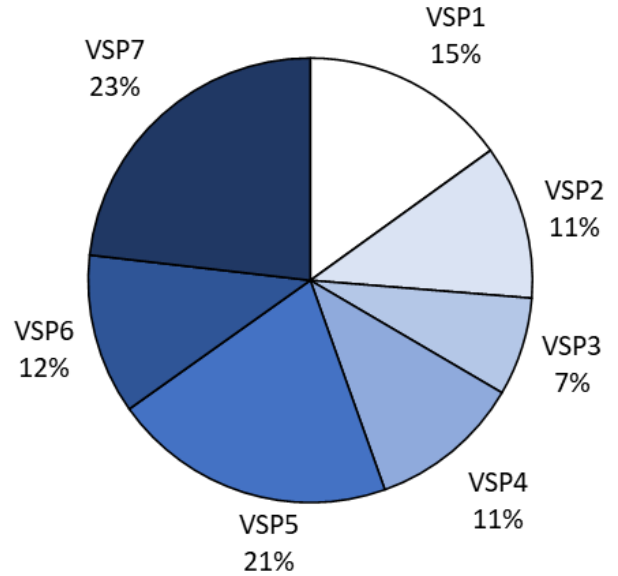
# Hallucinogenic Substances



Hallucinogenic Substance Submissions  
CY2016-2025



2025 Hallucinogenic Substances Submissions  
Across Virginia State Police (VSP) Divisions



Hallucinogenic Substances Identified\*

Substance Identified	CY2017-19	CY2020-22	CY2023-25
Psilocyn-Psilocybin	551	900	1,790
Ketamine & analogs	186	193	550
PCP & analogs	558	566	377
LSD & analogs	857	624	297
Tryptamines	143	89	173
Benzyloperazine (BZP)	3	0	1
Other	253	168	115

\*Sum of individual substances will not match the total, as some cases involved more than one hallucinogenic substance.

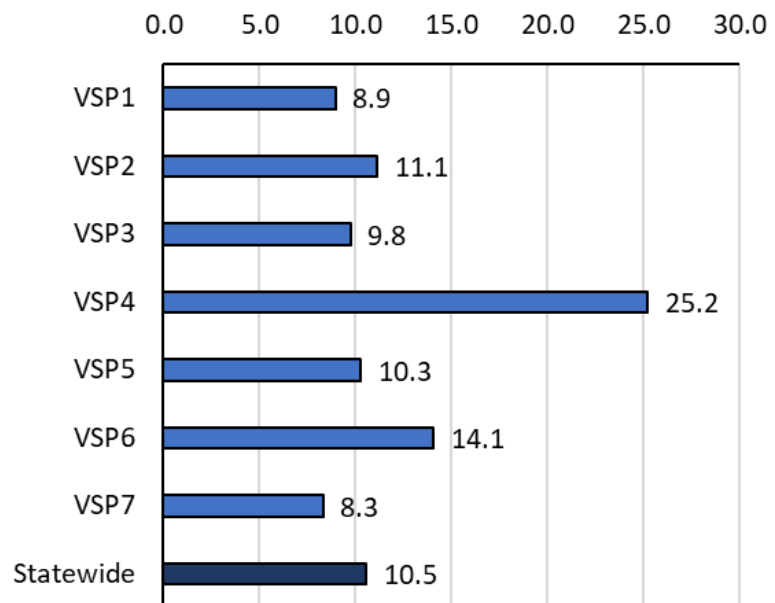
Hallucinogenic substance submissions to DFS represented 3% of total drug submissions in 2025.

Hallucinogenic substances have not demonstrated a consistent year-to-year trend over time. Recently submissions increased in 2023 and 2024 by 10% and 13% respectively, and remained the same in 2025.

The most common hallucinogenic substance group identified in submissions to DFS in the past several years is Psilocyn-Psilocybin (mushrooms), and the second most common is Ketamine and Ketamine analogs. Detailed ten-year trends on individual hallucinogenic substances are provided in Appendix B.

The largest number of hallucinogenic substance submissions in 2025 were from VSP 7, but the Division with the highest rate of submissions per 100,000 population was VSP 4.

2025 Hallucinogenic Substances  
Submissions Rate per 100,000



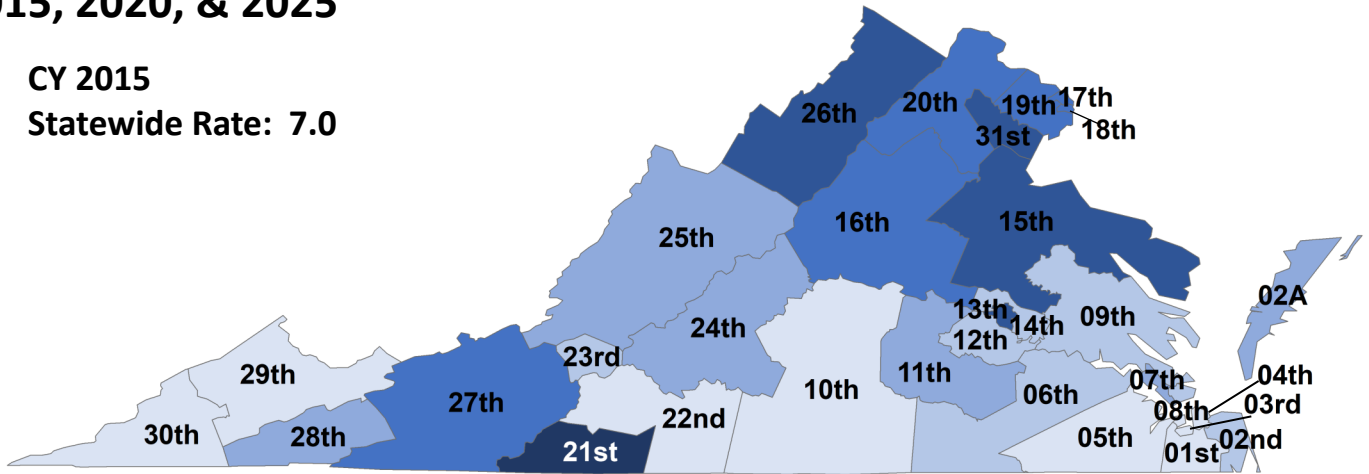
Statewide, the rate of hallucinogenic substance submissions in 2025 was 10.5 per 100,000, up 16% from 2020.

The maps on the following page present the changing pattern of hallucinogenic substance submission rates, by Virginia Court District.

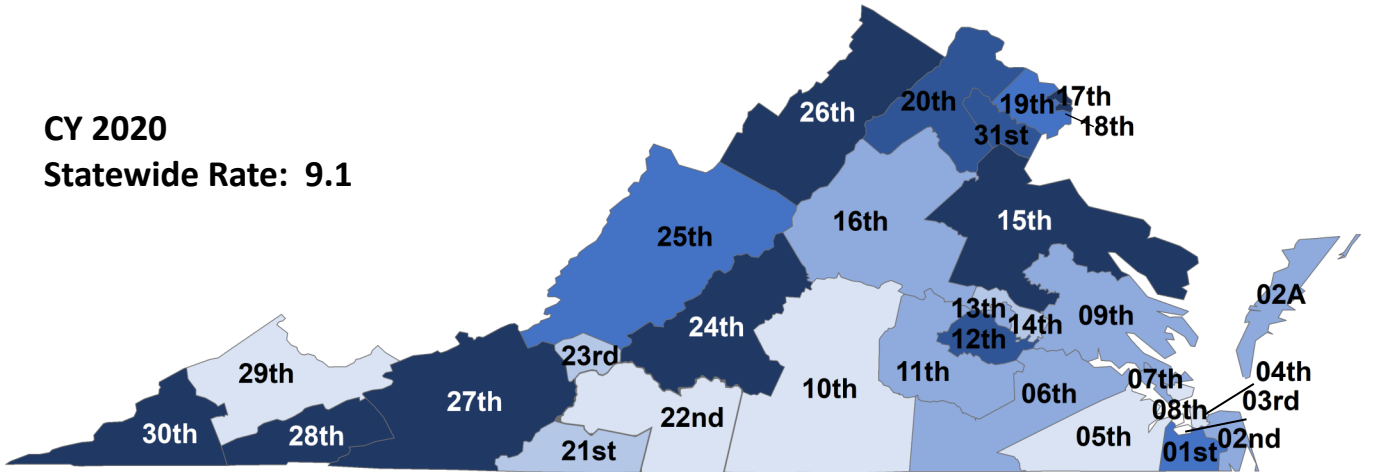
# Hallucinogenic Substances

## Hallucinogenic Substance Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

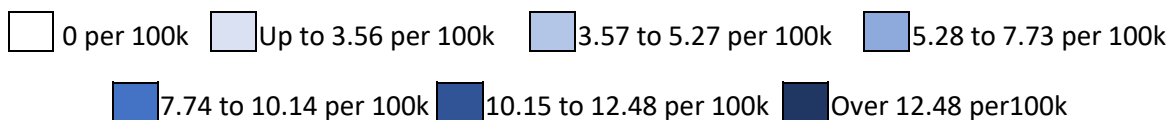
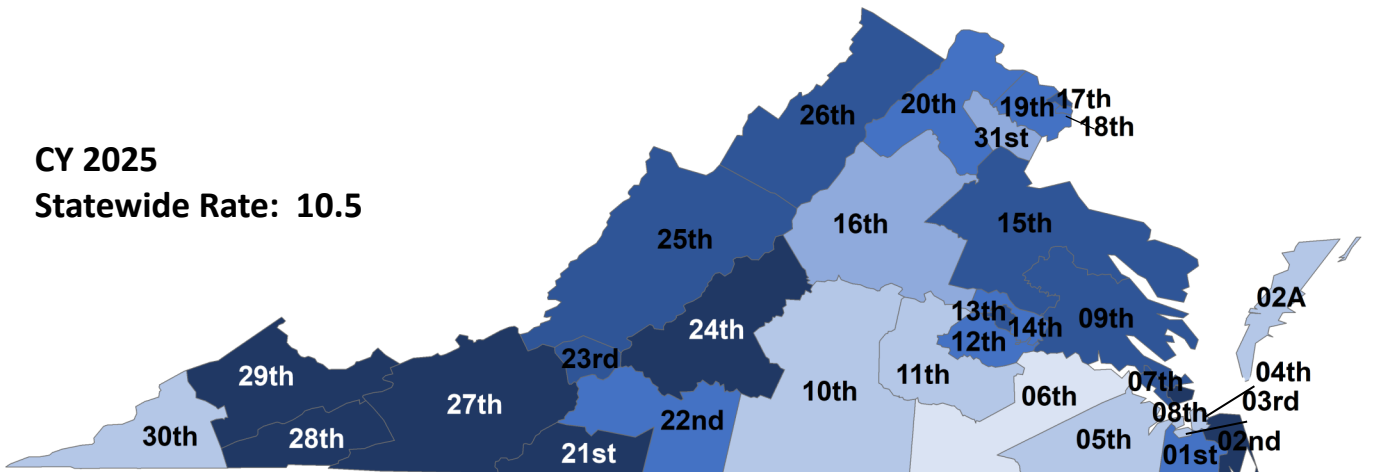
CY 2015  
Statewide Rate: 7.0



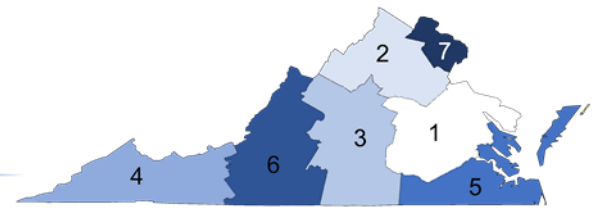
CY 2020  
Statewide Rate: 9.1



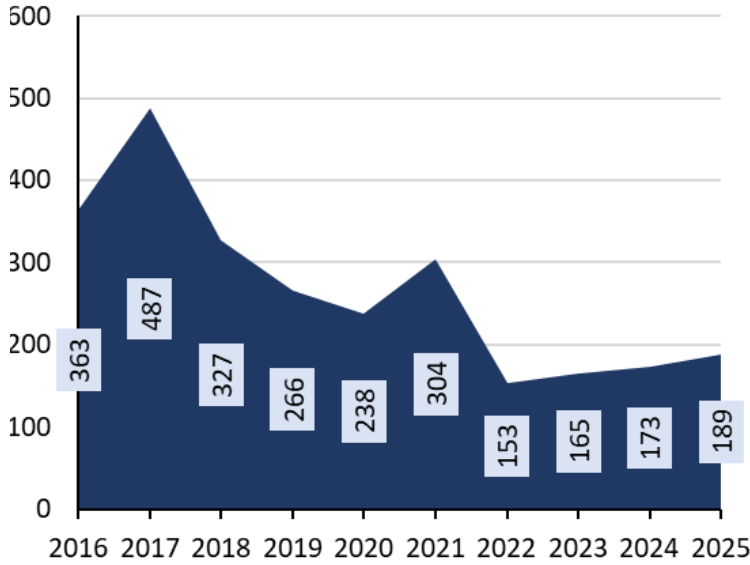
CY 2025  
Statewide Rate: 10.5



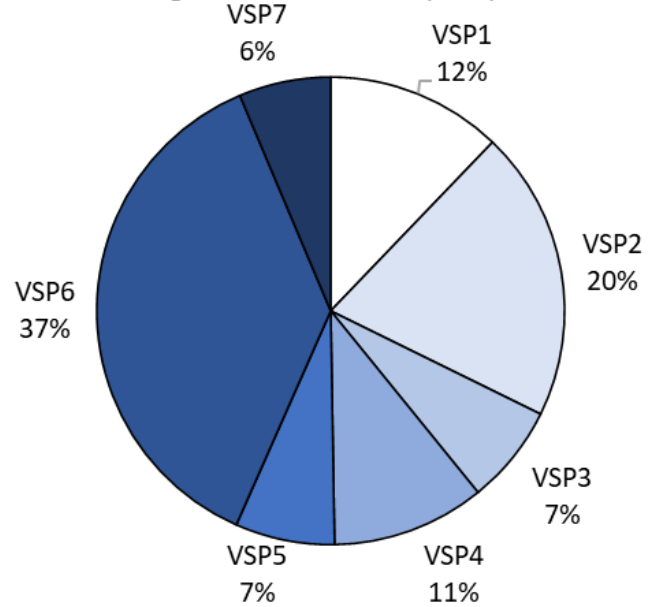
# Cannabimimetic Agents



Cannabimimetic Agent Submissions  
CY2016-2025



2025 Cannabimimetic Agent Submissions  
Across Virginia State Police (VSP) Divisions



Cannabimimetic Agents Identified\*

Substance Identified	CY2017-19	CY2020-22	CY2023-25
Indazole carboxamides	921	587	603
Alkoylindoles	24	9	1
Indole carboxamides	168	111	1
Naphthoylindoles	5	0	1
Benzoylindoles	0	2	0
Indole carboxylates	2	0	0
Other or unclear	28	14	3

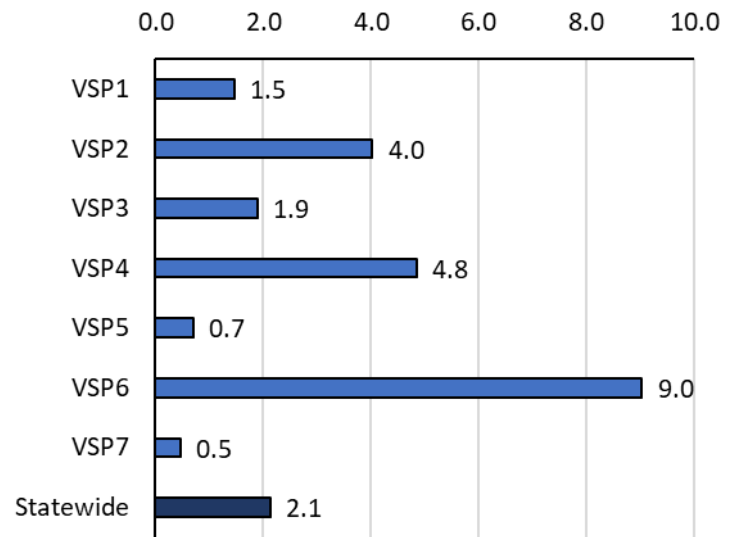
\*Sum of individual substances will not match the total, as some cases involved more than one cannabimimetic agent.

Cannabimimetic agent submissions to DFS represented roughly 1% of total drug submissions in 2025.

Cannabimimetic agent submissions peaked in 2013 (not shown), and dropped consistently in later years (with the exception of 2017), dropping 79% overall between 2013 and 2020. Submissions increased 28% in 2021, then dropped 50% in 2022. Submissions have increased since; by 8% in 2023, 4% in 2024, and 9% in 2025.

The types of cannabimimetic agents that are most prevalent among submissions has varied substantially over time. Alkoylindoles (e.g., UR-144) were the most common during the peak years of cannabimimetic agent submissions, but indazole carboxamides (e.g., AMB-FUBINACA) have been the most common in recent years. In some cases, cannabimimetic agents were identified prior to being expressly proscribed in the *Code of Virginia*. In those cases, the specific type of cannabimimetic agent may be unclear in the record. Detailed ten-

2025 Cannabimimetic Agent Submissions  
Rate per 100,000



year trends on individual cannabimimetic agents are provided in Appendix B.

Virginia State Police division 6 was responsible for the highest number of submissions in 2025. VSP6 had the highest rate of cannabimimetic agent submissions in 2025.

Statewide, the rate of cannabimimetic agent submissions in 2025 was 2.1 per 100,000, down 23% from 2020.

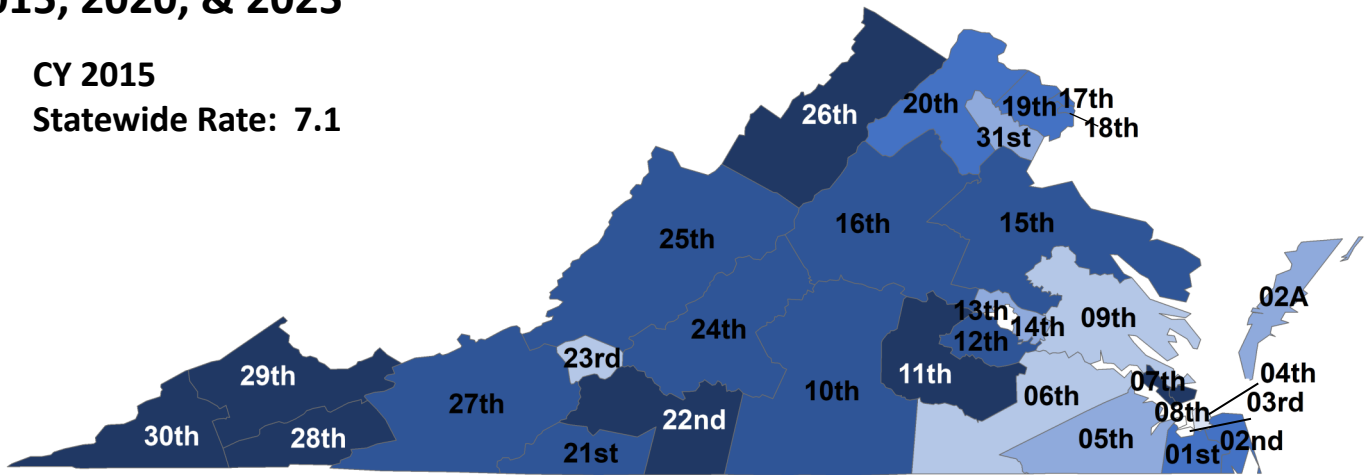
The maps on the following page present the changing pattern of cannabimimetic agent submission rates, by Virginia Court District.

# Cannabimimetic Agents

## Cannabimimetic Agent Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

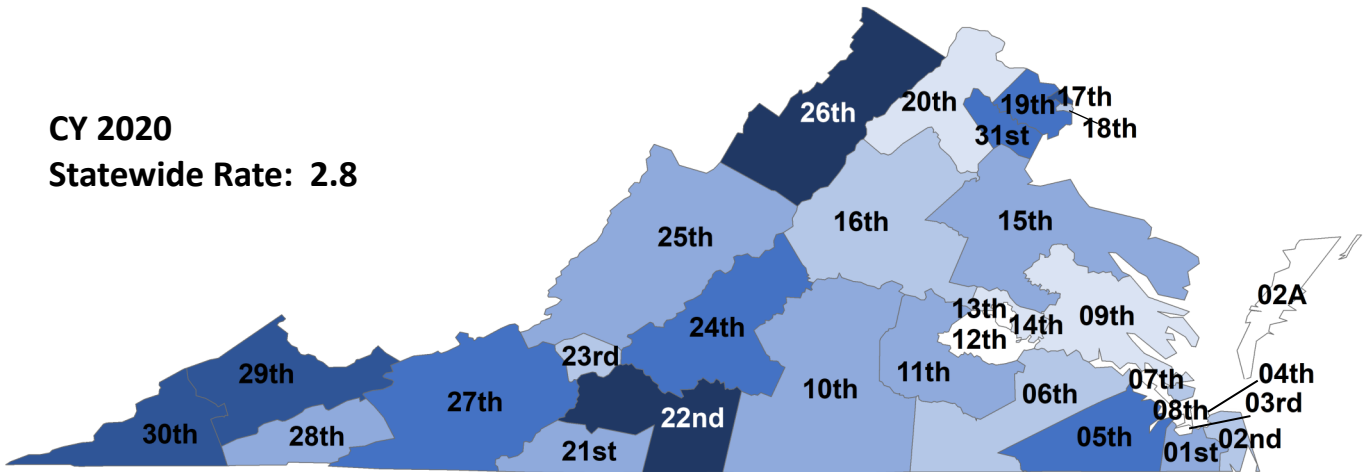
CY 2015

Statewide Rate: 7.1



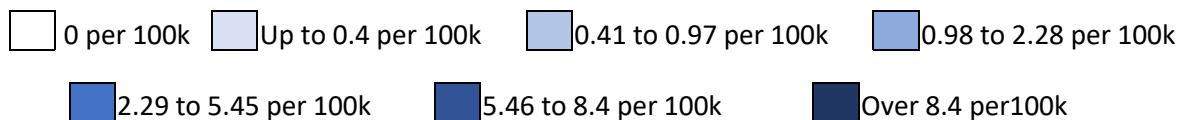
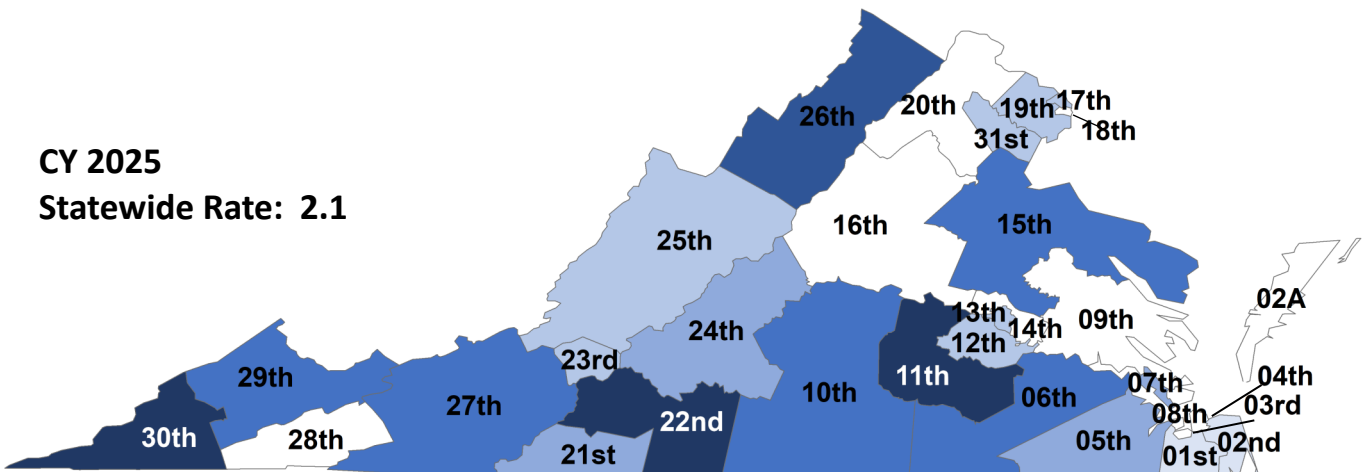
CY 2020

Statewide Rate: 2.8

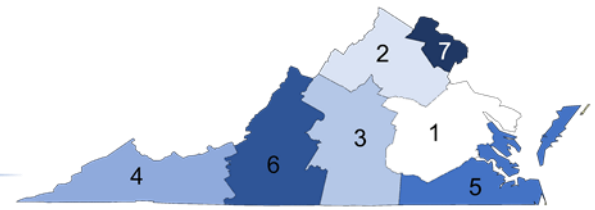


CY 2025

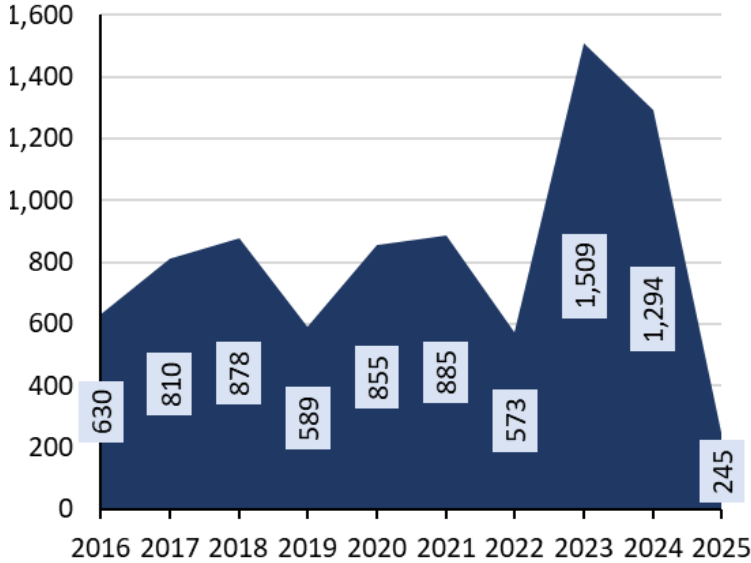
Statewide Rate: 2.1



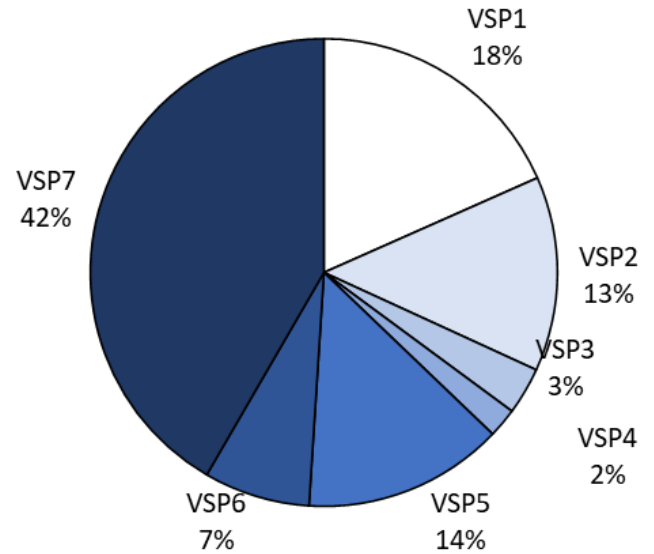
# Other Designer Drugs



Other Designer Drug Submissions  
CY2016-2025



2025 Designer Drug Submissions Across  
Virginia State Police (VSP) Divisions



Designer Drugs Identified\*

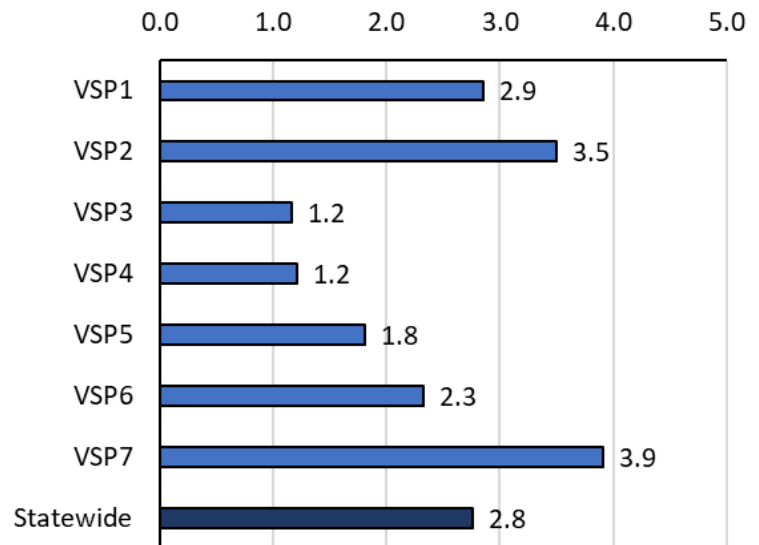
Substance Identified	CY2017-19	CY2020-22	CY2023-25
<b>Synthetic Cathinone</b>			
N,N-dimethylpentylone	0	392	2,358
Eutylone	242	1,530	125
Alpha-PVP	4	3	5
Methylone	6	0	2
N-ethylpentylone	1,044	11	1
Dibutylone	213	0	0
Ethylone	23	0	0
MDPV	3	0	0
Other	111	137	245
<b>Substituted Amphetamine</b>			
MDMA (Ecstasy)	574	262	488
Other	174	69	44

\*Sum of individual substances will not match the total, as some cases involved more than one designer drug.

Designer drugs comprised 1% of submissions in 2025. The frequency of designer drug submissions, and the type submitted, has not displayed a consistent trend. Submissions increased 163% in 2023, then decreased 14% in 2024, and plummeted by 81% in 2025.

The types of designer drugs that are most prevalent among submissions changes over time, as newly developed drugs replace older ones. There were no Eutylone submissions until 2018, then it soon was the most prominent designer drug. Similarly, N,N-dimethylpentylone was first submitted in 2021, and has recently

2025 Designer Drug Submissions  
Rate per 100,000



become the most frequently submitted. Detailed ten-year trends on individual designer drugs are provided in Appendix B.

Both the highest number and the highest rate of designer drug submissions in 2025 were from VSP 7.

Statewide, the rate of designer drug submissions in 2025 was 2.8 per 100,000, up 42% from 2020.

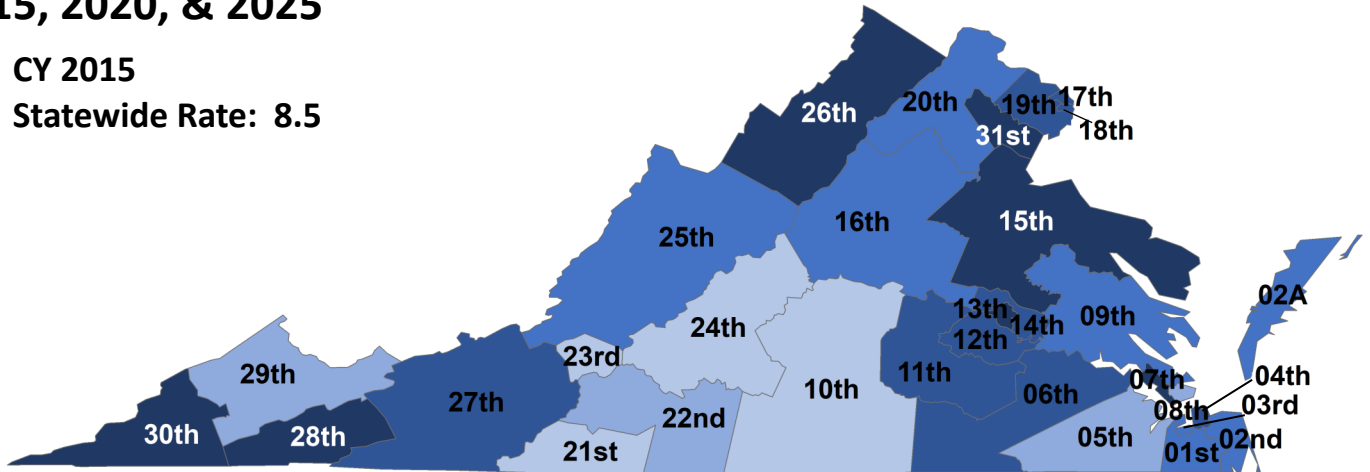
The maps on the following page present the changing pattern of designer drug submission rates, by Virginia Court District.

# Other Designer Drugs

## Other Designer Drug Submissions by Court District, Rate per 100,000 CY 2015, 2020, & 2025

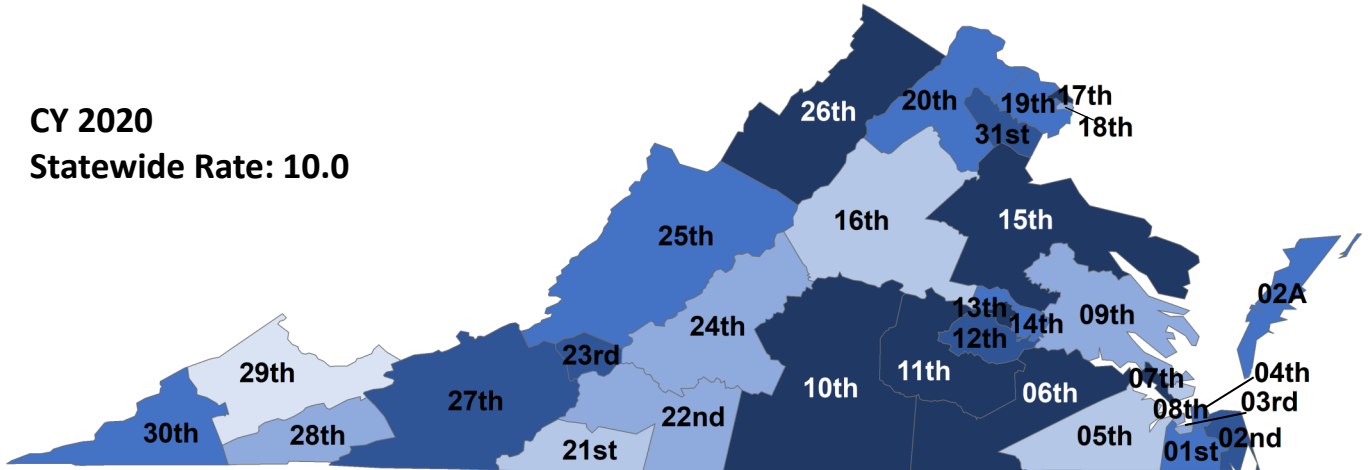
CY 2015

Statewide Rate: 8.5



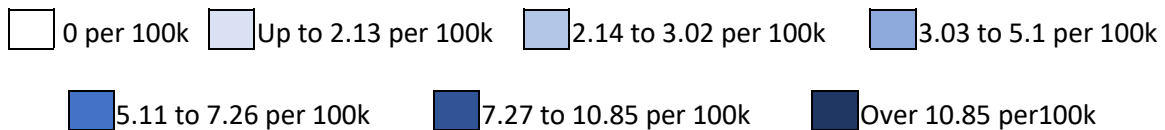
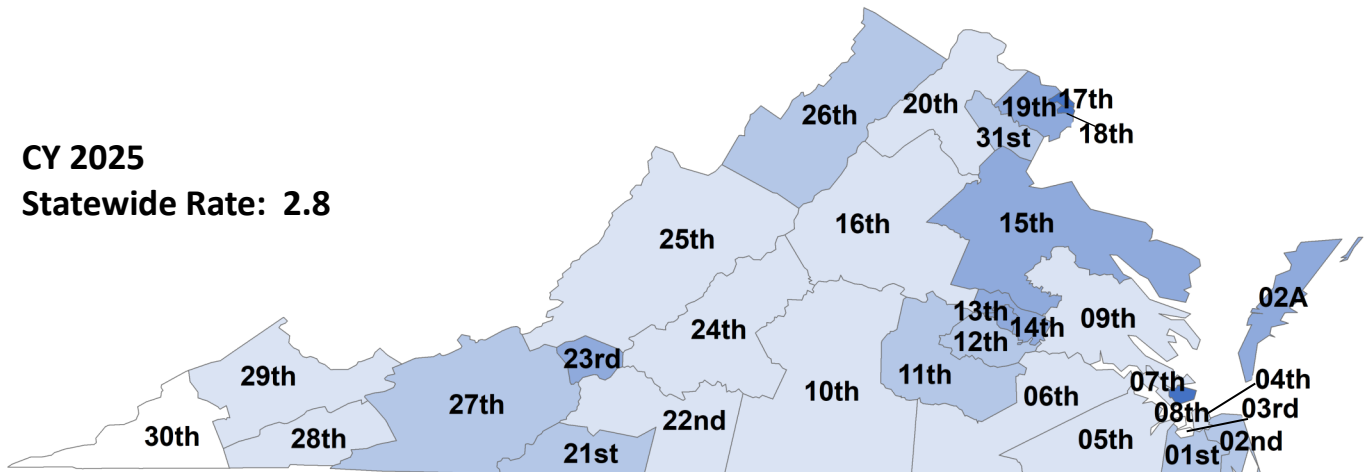
CY 2020

Statewide Rate: 10.0



CY 2025

Statewide Rate: 2.8



# Appendix A

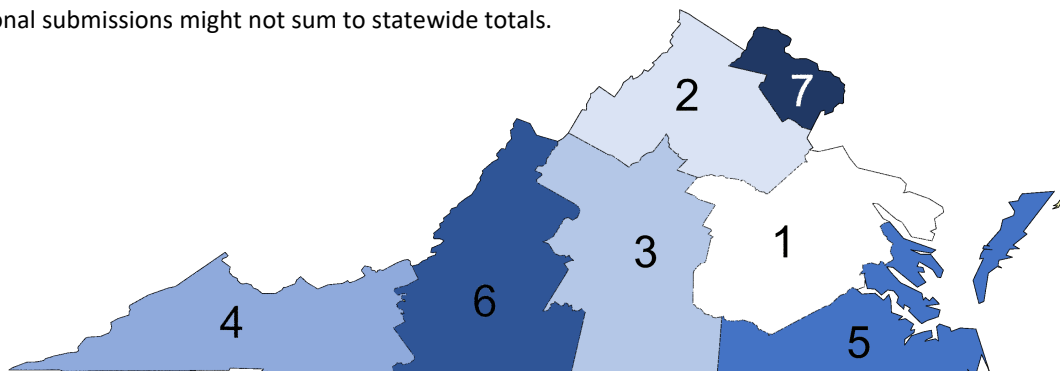
## Regional Trends—Number of Submissions

Cocaine										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	2,082	2,586	2,911	3,035	2,309	2,167	2,166	2,303	2,472	2,541
VSP2	748	1,006	1,083	942	801	766	808	1,167	1,135	1,237
VSP3	768	871	763	700	468	387	392	566	665	705
VSP4	195	155	144	134	85	79	81	139	164	177
VSP5	1,891	2,415	2,414	2,372	1,827	1,648	1,989	2,310	2,347	2,621
VSP6	812	947	941	844	529	487	586	636	760	735
VSP7	1,101	1,346	1,449	1,426	944	985	1,226	1,812	1,710	2,225

Methamphetamine										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	110	171	300	525	743	774	775	873	1,015	882
VSP2	423	660	845	1,171	1,387	1,492	1,427	1,381	1,411	1,334
VSP3	680	1,051	1,295	1,460	1,410	1,236	1,271	1,229	1,231	1,245
VSP4	1,172	1,582	2,461	3,107	2,799	2,678	2,324	2,442	2,305	2,170
VSP5	191	251	398	702	840	946	1,027	1,112	942	1,026
VSP6	906	1,352	2,164	2,513	2,314	2,118	2,258	2,195	2,228	1,909
VSP7	99	158	218	247	215	286	306	367	377	327

Prescription Stimulants										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	200	230	184	155	161	113	101	96	103	92
VSP2	164	164	153	133	110	82	84	61	52	70
VSP3	76	79	68	53	33	16	35	25	28	31
VSP4	74	93	81	75	51	39	41	21	22	24
VSP5	193	235	211	202	159	97	132	113	109	92
VSP6	123	140	112	100	57	53	38	48	42	45
VSP7	218	217	216	148	82	77	77	68	53	43

Regional submissions might not sum to statewide totals.



# Appendix A

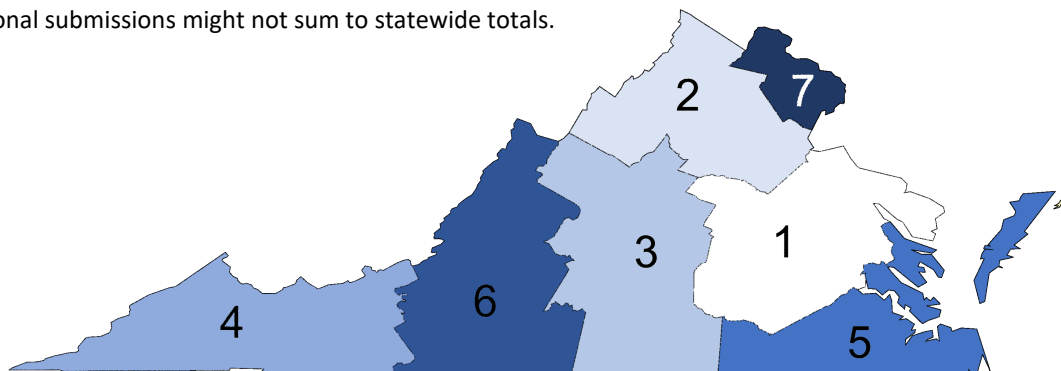
## Regional Trends—Number of Submissions

Heroin										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	1,661	1,657	1,378	1,418	940	668	469	197	314	265
VSP2	1,032	840	619	521	351	223	147	94	98	71
VSP3	238	281	251	245	192	140	86	69	61	60
VSP4	58	63	46	81	132	82	50	33	31	50
VSP5	1,247	1,255	1,059	1,041	776	582	345	247	252	251
VSP6	413	532	787	771	557	319	200	211	267	241
VSP7	766	597	485	338	229	135	85	73	109	176

Illicit Synthetic Opioids										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	363	752	666	767	1,268	1,367	1,296	1,182	1,151	960
VSP2	246	442	570	555	883	965	874	1,008	690	396
VSP3	29	113	101	118	226	259	297	373	328	256
VSP4	11	23	24	33	126	209	298	374	383	374
VSP5	532	660	568	723	934	1,034	1,050	1,119	866	792
VSP6	48	193	225	240	594	660	789	803	798	624
VSP7	261	437	453	463	640	945	1,275	2,316	2,023	1,152

Prescription Opioids										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	792	732	693	752	574	606	412	312	337	312
VSP2	756	591	517	463	454	401	307	249	196	196
VSP3	368	277	248	270	196	166	155	152	125	121
VSP4	1,374	1,264	1,052	1,005	813	765	609	550	489	522
VSP5	534	513	390	420	344	322	324	312	266	228
VSP6	646	730	665	498	418	404	372	366	338	357
VSP7	388	386	351	338	196	195	212	200	151	174

Regional submissions might not sum to statewide totals.



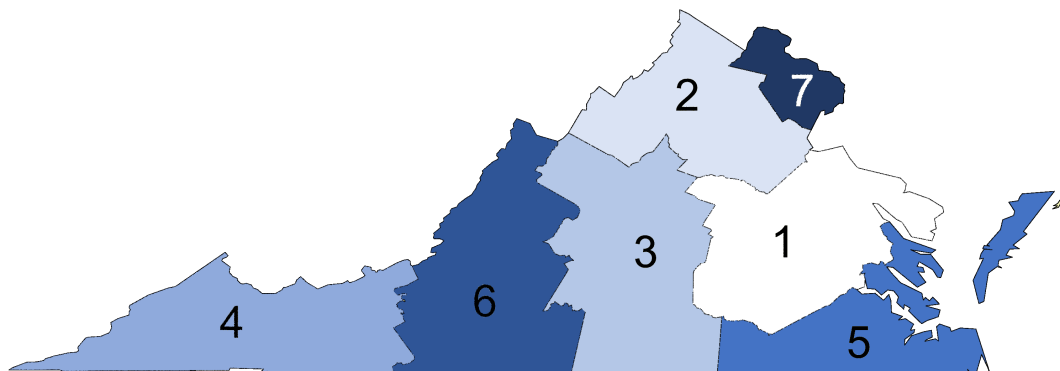
# Appendix A

## Regional Trends—Number of Submissions

Illicit Benzodiazepines										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	2	16	25	64	150	147	58	74	74	91
VSP2	5	10	33	124	244	201	53	53	43	33
VSP3	4	7	10	37	67	47	13	15	22	31
VSP4	0	4	18	36	60	82	30	30	29	25
VSP5	4	16	16	63	119	140	60	54	49	33
VSP6	0	5	6	26	54	89	54	18	52	39
VSP7	18	38	50	167	306	174	72	75	56	60

Prescription Benzodiazepines										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	404	377	344	239	201	178	132	135	130	119
VSP2	266	271	253	163	117	110	88	86	73	53
VSP3	106	116	101	88	37	48	42	45	32	38
VSP4	440	392	342	301	233	194	179	164	155	149
VSP5	364	330	245	179	141	112	112	131	87	93
VSP6	238	289	287	222	129	122	126	106	108	120
VSP7	484	391	387	190	109	75	65	65	64	58

Regional submissions might not sum to statewide totals.



# Appendix A

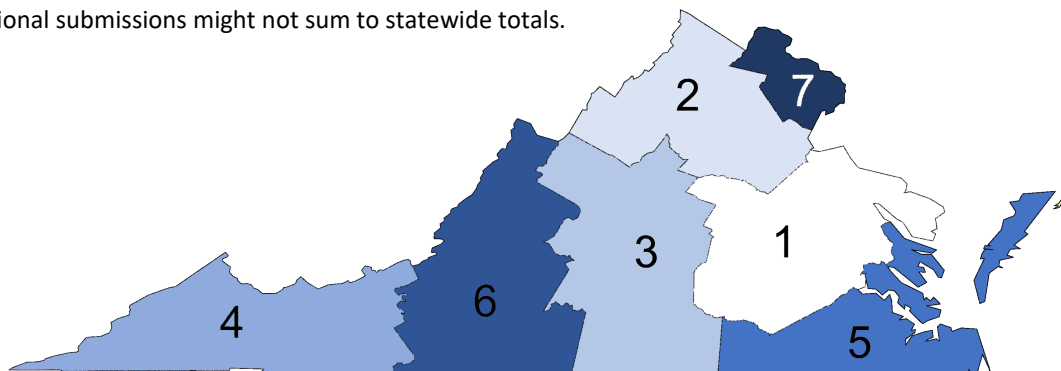
## Regional Trends—Number of Submissions

Hallucinogenic Substances										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	80	90	80	73	109	78	98	110	142	141
VSP2	89	129	107	117	158	166	122	118	133	105
VSP3	55	44	63	55	65	47	55	54	64	67
VSP4	26	37	24	32	47	41	30	34	78	104
VSP5	75	86	84	95	89	89	130	165	152	193
VSP6	76	122	80	68	45	50	64	77	107	109
VSP7	309	288	289	296	267	301	251	267	256	217

Cannabimimetic Agents										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	62	35	8	11	4	11	2	5	16	23
VSP2	63	104	46	37	56	82	26	33	28	38
VSP3	10	14	14	14	13	28	14	11	7	13
VSP4	92	45	9	15	20	62	67	41	32	20
VSP5	45	36	16	19	15	5	4	19	20	13
VSP6	33	95	106	76	70	87	36	45	57	70
VSP7	58	158	128	94	60	29	4	11	13	12

Other Designer Drugs										
VSP	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
VSP1	129	204	227	116	218	181	72	97	47	45
VSP2	78	108	159	99	222	269	135	278	188	33
VSP3	27	49	39	36	37	35	9	7	5	8
VSP4	20	26	14	28	22	18	14	16	5	5
VSP5	116	133	130	105	128	90	52	55	51	34
VSP6	45	67	46	39	45	31	17	10	20	18
VSP7	215	223	263	166	183	261	274	1,046	978	102

Regional submissions might not sum to statewide totals.



# Appendix B – Ten-Year Trends, Statewide

Stimulants	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
Cocaine	7,597	9,326	9,706	9,453	6,964	6,519	7,250	8,935	9,253	10,230
Methamphetamine	3,581	5,225	7,681	9,728	9,709	9,531	9,393	9,603	9,510	8,888
<b>Prescription Stimulants</b>										
Amphetamine	798	932	828	686	552	404	415	363	343	346
Lisdexamfetamine	135	112	89	75	46	32	43	33	20	26
Methylphenidate	149	137	122	112	66	43	52	42	41	31
Other	18	29	22	20	12	20	14	11	14	9
Opioids	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
Heroin	5,415	5,225	4,626	4,415	3,177	2,149	1,382	924	1,132	1,094
<b>Illicit Synthetic Opioids</b>										
Fentanyl	1,177	1,705	2,346	2,814	4,625	5,295	5,727	7,087	6,125	4,370
Para-Fluorofentanyl	1	0	0	0	24	463	730	421	506	141
Acetyl Fentanyl	28	12	141	276	97	65	42	49	31	5
FIBF	22	378	187	29	7	2	0	0	0	0
Furanyl Fentanyl	228	538	24	1	0	1	0	0	0	0
Fentanyl Analog - Other	12	122	85	47	26	4	12	16	17	101
Nitazenes	0	0	0	0	1	46	16	16	6	11
Other Illicit Synthetic Opioids	103	187	69	82	60	31	24	12	11	16
<b>Prescription Opioids</b>										
Buprenorphine	1,221	1,394	1,438	1,592	1,385	1,336	1,160	1,108	1,018	980
Codeine	97	88	66	67	48	38	28	35	21	21
Hydrocodone	982	847	598	495	325	244	226	221	225	181
Hydromorphone	296	197	164	93	52	70	44	56	25	31
Methadone	226	191	153	137	110	96	82	67	68	75
Morphine	301	261	175	154	80	72	54	41	43	45
Oxycodone	1,792	1,552	1,277	1,165	763	626	627	648	520	558
Tramadol	256	249	274	305	413	587	325	134	106	114
Other	224	183	123	81	35	29	23	19	11	13

# Appendix B – Ten-Year Trends, Statewide

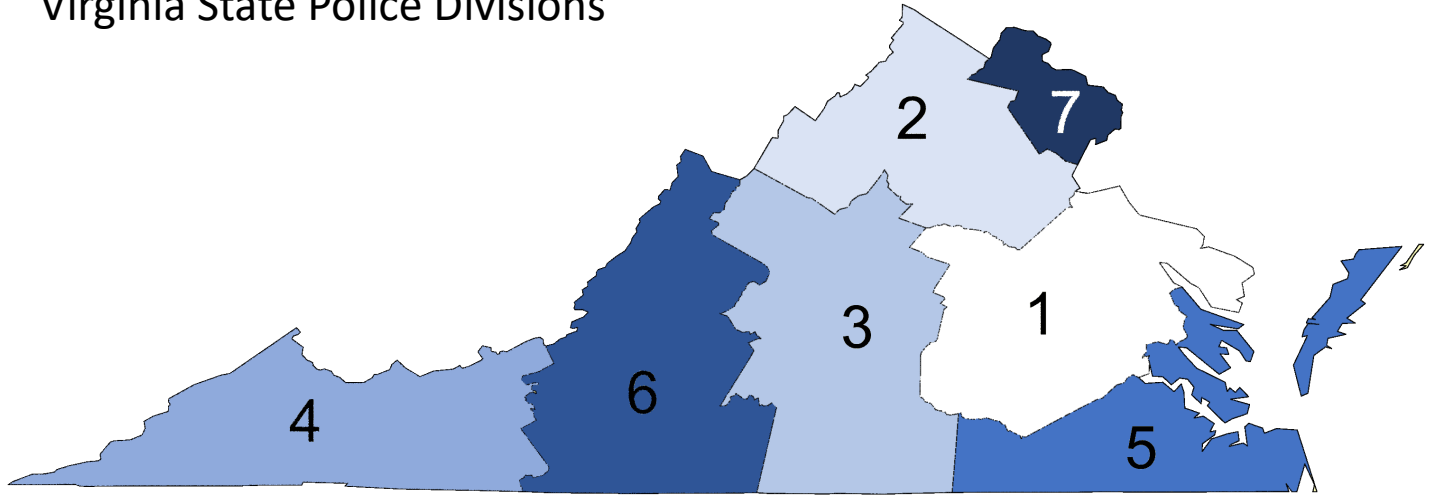
Benzodiazepines	CY2016	CY2017	CY2018	CY2019	CY2020	CY2021	CY2022	CY2023	CY2024	CY2025
<b>Illicit Benzodiazepines</b>										
Bromazolam	0	0	0	0	0	40	120	270	295	224
Clonazolam	5	8	55	50	221	400	121	39	14	5
Etizolam	27	61	79	353	544	372	52	10	8	2
Flualprazolam	0	0	7	111	265	81	38	7	5	1
Other	1	31	17	25	29	47	58	16	22	95
<b>Prescription Benzodiazepines</b>										
Alprazolam (Xanax)	1,726	1,541	1,423	931	625	531	466	464	410	372
Clonazepam (Klonopin)	471	478	422	362	283	248	254	225	201	206
Diazepam (Valium)	200	190	168	146	99	82	60	72	65	78
Lorazepam (Ativan)	101	115	95	88	37	47	39	41	26	42
Other	18	21	12	12	11	7	6	3	4	7
<b>Hallucinogenic Substances</b>										
Benzylpiperazine (BZP)	13	2	0	1	0	0	0	1	0	0
Ketamine & analogs	54	63	57	66	74	61	58	71	146	236
LSD & analogs	263	358	260	239	269	226	129	106	87	75
PCP & analogs	186	181	185	192	216	192	158	134	107	100
Psilocybin-Psilocybin (mushrooms)	135	179	173	199	188	288	425	516	587	496
Tryptamines	39	39	45	59	38	36	15	20	44	90
Other	98	53	105	95	62	73	33	36	43	28
<b>Cannabimimetic Agents</b>										
Alkoylindoles	33	9	9	6	8	0	1	1	0	0
Benzoylindoles	0	0	0	0	0	1	1	0	0	0
Indazole carboxamides	256	470	319	132	143	296	148	164	177	216
Indole carboxamides	0	0	3	165	106	4	1	1	0	0
Indole carboxylates	45	1	1	0	0	0	0	0	0	0
Naphthoylindoles	2	5	0	0	0	0	0	1	0	0
Phenylacetylindoles	1	0	0	0	0	0	0	0	0	0
Other or unclear	61	13	6	9	6	5	3	0	2	1
<b>Other Designer Drugs</b>										
<b>Substituted Amphetamines</b>										
MDMA (Ecstasy)	173	201	169	204	102	76	84	90	158	175
Other	45	82	36	56	23	15	31	18	9	12
<b>Synthetic Cathinones</b>										
Alpha-PVP	17	3	1	0	0	1	2	4	1	0
Dibutylone	224	167	44	2	0	0	0	0	0	0
Ethylone	57	13	7	3	0	0	0	0	0	0
Eutylone	0	0	3	239	704	766	60	49	60	11
MDPV	3	1	0	2	0	0	0	0	0	0
Methylone	15	3	2	1	0	0	0	0	0	1
N,N-dimethylpentylone	0	0	0	0	0	16	376	1,354	962	24
N-ethylpentylone	83	353	625	66	8	2	1	1	0	0
Other	59	36	20	55	51	37	49	27	161	39

# Appendix C – Other Opioids

<b>Fentanyl Analog – Other</b>		<b>CY2025 Submissions</b>
Carfentanil		64
N-(2-methylphenyl)-N-[1-(2-phenethyl)piperidin-4-yl]propanamide (ortho-methylfentanyl)		1
ortho-methylfentanyl		36
<b>Other Illicit Synthetic Opioids</b>		
6-Monoacetylmorphine		16
<b>Other Prescription Opioids</b>		
Fentanyl		3
Naltrexone		1
Oxymorphone		3
Pethidine (Meperidine)		1
Tapentadol		8

# Appendix D – Virginia Regions

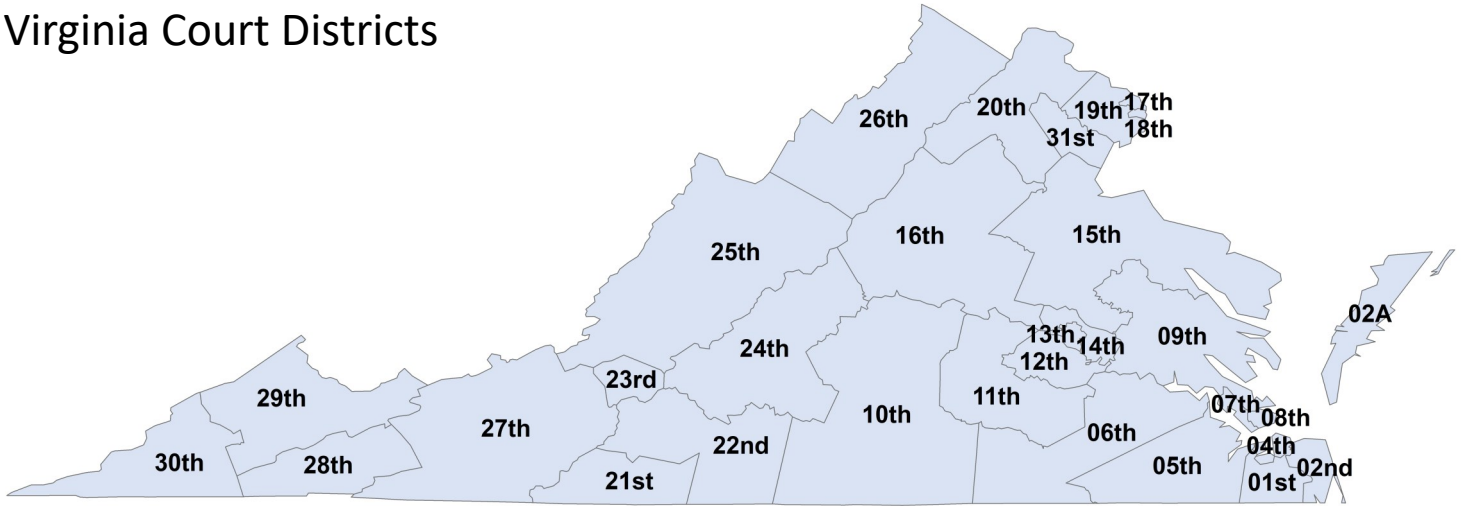
## Virginia State Police Divisions



<u>Division 1</u>	<u>Division 2</u>	<u>Division 3</u>	<u>Division 4</u>	<u>Division 5</u>	<u>Division 6</u>	<u>Division 7</u>
Amelia County	Clarke County	Albemarle County	Bland County	Accomack County	Alleghany County	Arlington County
Caroline County	Culpeper County	Amherst County	Buchanan County	Brunswick County	Bath County	Fairfax County
Charles City County	Fauquier County	Appomattox County	Carroll County	Gloucester County	Bedford County	Loudoun County
Chesterfield County	Frederick County	Augusta County	Dickenson County	Greensville County	Botetourt County	Prince William County
Dinwiddie County	Madison County	Buckingham County	Giles County	Isle of Wight County	Craig County	Alexandria City
Essex County	Orange County	Campbell County	Grayson County	James City County	Floyd County	Fairfax City
Goochland County	Page County	Charlotte County	Lee County	Mathews County	Franklin County	Falls Church City
Hanover County	Rappahannock County	Cumberland County	Pulaski County	Middlesex County	Henry County	Manassas City
Henrico County	Rockingham County	Fluvanna County	Russell County	Northampton County	Highland County	Manassas Park City
King and Queen County	Shenandoah County	Greene County	Scott County	Southampton County	Montgomery County	
King George County	Spotsylvania County	Halifax County	Smyth County	Surry County	Patrick County	
King William County	Stafford County	Lunenburg County	Tazewell County	Sussex County	Pittsylvania County	
Lancaster County	Warren County	Mecklenburg County	Washington County	York County	Roanoke County	
Louisa County	Fredericksburg City	Nelson County	Wise County	Chesapeake City	Rockbridge County	
New Kent County	Harrisonburg City	Prince Edward County	Wythe County	Emporia City	Bedford City	
Northumberland County	Winchester City	Charlottesville City	Bristol City	Franklin City	Buena Vista City	
Nottoway County		Lynchburg City	Galax City	Hampton City	Danville City	
Powhatan County		Staunton City	Norton City	Newport News City	Lexington City	
Prince George County		Waynesboro City		Norfolk City	Martinsville City	
Richmond County				Poquoson City	Radford City	
Westmoreland County				Portsmouth City	Roanoke City	
Colonial Heights City				Suffolk City	Salem City	
Hopewell City				Virginia Beach City		
Petersburg City				Williamsburg City		
Richmond City						

# Appendix D – Virginia Regions

## Virginia Court Districts



District	Locality	District	Locality	District	Locality	District	Locality	District	Locality
1st	Chesapeake City	10th	Appomattox County	16th	Albemarle County	24th	Amherst County	27th	Bland County
2A	Accomack County		Buckingham County		Charlottesville City		Bedford City		Carroll County
	Northampton County		Charlotte County		Culpeper County		Bedford County		Floyd County
2nd	Virginia Beach City		Cumberland County		Fluvanna County		Campbell County		Galax City
3rd	Portsmouth City		Halifax County		Goochland County		Lynchburg City		Giles County
4th	Norfolk City		Lunenburg County		Greene County		Nelson County		Grayson County
5th	Franklin City		Mecklenburg County		Louisa County	25th	Alleghany County		Montgomery County
	Isle of Wight County		Prince Edward County		Madison County		Augusta County		Pulaski County
	Southampton County	11th	Amelia County		Orange County		Bath County		Radford City
	Suffolk City		Dinwiddie County	17th	Arlington County		Botetourt County		Wythe County
6th	Brunswick County		Nottoway County		Falls Church City		Buena Vista City	28th	Bristol City
	Emporia City		Petersburg City	18th	Alexandria City		Clifton Forge		Smyth County
	Greensville County		Powhatan County	19th	Fairfax City		Covington City		Washington County
	Hopewell City	12th	Chesterfield County		Fairfax County		Craig County	29th	Buchanan County
	Prince George County		Colonial Heights City	20th	Fauquier County		Highland County		Dickenson County
	Surry County	13th	Richmond City		Loudoun County		Lexington City		Russell County
	Sussex County	14th	Henrico County		Rappahannock County		Rockbridge County		Tazewell County
7th	Newport News City	15th	Caroline County	21st	Henry County		Staunton City	30th	Lee County
8th	Hampton City		Essex County		Martinsville City		Waynesboro City		Norton City
9th	Charles City County		Fredericksburg City		Patrick County	26th	Clarke County		Scott County
	Gloucester County		Hanover County	22nd	Danville City		Frederick County		Wise County
	James City County		King George County		Franklin County		Harrisonburg City	31st	Manassas City
	King and Queen County		Lancaster County		Pittsylvania County		Page County		Manassas Park City
	King William County		Northumberland County	23rd	Roanoke City		Rockingham County		Prince William County
	Mathews County		Richmond County		Roanoke County		Shenandoah County		
	Middlesex County		Spotsylvania County		Salem City		Warren County		
	New Kent County		Stafford County				Winchester City		
	Poquoson City		Westmoreland County						
	Williamsburg City								
	York County								