COMPUTER CRIMES & ELECTRONIC EVIDENCE
INCOMING EVIDENCE CHECKLIST

Examiner Initials _____

Submitting Agency: _____ **Agency Item #:** _____

Agency Case #: _____

Source (check one): ☐ **Suspect** ☐ **Victim** ☐ **Other:** _____

1. Has the evidence being submitted been turned on or has any evidence been reviewed prior to submission?
   ☐ No ☐ Yes – Please explain: _____
   Was this examination performed by another forensic lab?
   ☐ Yes (cannot examine without approval – submit letter) ☐ No
   Provide the dates, times and by whom the evidence was accessed:
   _____
2. Are there any legal authority (warrant) restrictions? Please specify:
   _____
3. Is evidence being submitted as part of a Cybertip? ☐ No ☐ Yes – Attach printed Cybertip notification that includes file names/hash values.
4. Is the submitting officer aware of any privileged information that may be contained on the evidence being submitted? (i.e. Attorney-client communication, published articles)
   ☐ No ☐ Yes – Please explain:
   _____
5. Are there any specific words or phrases that would assist the examiner in the analysis of the evidence?
   ☐ No ☐ Yes – Please list below:
   _____
6. Are there any specific e-mail addresses that would assist the examiner in the analysis of the evidence?
   ☐ No ☐ Yes – Please list below:
   _____
7. Is there any other information that would assist the examiner in the analysis of the evidence including passwords, pin codes or pattern locks?
   ☐ No ☐ Yes – Please explain:
   _____

Section use only

Check here and initial to confirm that the Division barcode labels on all of the submitted evidence match with the Request for Analysis form and the Division Evidence Receipt.

Initials: _____