

Agency Case #:

Central Coast Cyber Forensics Lab (3CFL)

3CFL Case #:

Request for Digital Examination

Requesting Agency Info

Submitting Agency:	Request Date:	Type of crime:
Submitting Person:	Phone:	Email:

Subjects

S, V, Other	Subject Information				
	Last	First	MI	AKAs	DOB

Evidence Submitted

(Owner from above, e.g., "S" "V" "S2")

LEAs will provide a copy of the Search Warrant, signed consent, electronic search terms or PRCS upon arrival at the 3CFL.

Line #	Item #	Owner	Description (Device Type, Make, Model, Passcode, etc.)	Authority (attached)	Service Request
				<input type="checkbox"/> Consent <input type="checkbox"/> Search Warrant <input type="checkbox"/> Parole/Probation	<input type="checkbox"/> Extraction <input type="checkbox"/> Analysis
				<input type="checkbox"/> Consent <input type="checkbox"/> Search Warrant <input type="checkbox"/> Parole/Probation	<input type="checkbox"/> Extraction <input type="checkbox"/> Analysis
				<input type="checkbox"/> Consent <input type="checkbox"/> Search Warrant <input type="checkbox"/> Parole/Probation	<input type="checkbox"/> Extraction <input type="checkbox"/> Analysis
				<input type="checkbox"/> Consent <input type="checkbox"/> Search Warrant <input type="checkbox"/> Parole/Probation	<input type="checkbox"/> Extraction <input type="checkbox"/> Analysis
				<input type="checkbox"/> Consent <input type="checkbox"/> Search Warrant <input type="checkbox"/> Parole/Probation	<input type="checkbox"/> Extraction <input type="checkbox"/> Analysis
				<input type="checkbox"/> Consent <input type="checkbox"/> Search Warrant <input type="checkbox"/> Parole/Probation	<input type="checkbox"/> Extraction <input type="checkbox"/> Analysis
				<input type="checkbox"/> Consent <input type="checkbox"/> Search Warrant <input type="checkbox"/> Parole/Probation	<input type="checkbox"/> Extraction <input type="checkbox"/> Analysis
				<input type="checkbox"/> Consent <input type="checkbox"/> Search Warrant <input type="checkbox"/> Parole/Probation	<input type="checkbox"/> Extraction <input type="checkbox"/> Analysis

Service Requested (Primary exam requirements)

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Chain of Custody

Line #s	Received from:	Delivered To:	Date/Time:

*Extractions will not be stored | Digital forensic reports will be submitted when filing a case.