

Universal Digital Evidence Worksheet

Fill in all sections as completely as possible. Attach additional documentation or information as needed.

Section 1. Case Information

Case Name:		Case/Docket Number:	
Attorney:		Contact Information:	
Investigator:		Contact Information:	

Section 2. Evidence Intake

Evidence Type:	Computer ___ Phone ___ GPS ___ Removable Storage ___ Other (Specify) _____ DVR _____ (Complete section 3)		
Intake Date/Time:		Evidence Number:	
Device Owner:		Contact Information:	
Device Make/Model:		Serial Number:	
Phone Number:		Carrier/Service Provider:	
Operating System:		O/S Version:	
Screen name(s):		Passcode, passwords:	
State of Device at Intake: (Powered on or off, detail any actions taken)			
Device Manual obtained?			
Physical Condition:			
Additional Components:			
Photograp Device:		Photograph Components:	

Section 3. DVR System & Settings

DVR Make/Model/Serial No.			
Multiplexer Make/Model/Serial No			
PC Based or Stand Alone?		Is system networked?	
Number of hard drives:		Capacity of each:	
Date of oldest recording:			
Are user manuals available?			
Native/Proprietary Format:			
Image Quality (High/Medium/Low)			
Frames Per Second:			
Aspect Ratio:			
System Firmware Version:			
System Password:			
Software password:			
Number of Cameras:		Active Camera Numbers:	
Are any Cameras Infrared? (Y/N)		If yes, specify cameras:	
Is Audio Recorded? (Y/N)		If yes, specify cameras:	
Any Camera(s) Motion Triggered?		If yes, specify cameras:	
Any Camera(s) Alarm Triggered?		If yes, specify cameras:	
System Date/Time Displayed:		Actual Time/Date:	
Sketch Scene		Note Camera Angles	