

CAMERA POD/IMAGE RETRIEVAL INVESTIGATIVE REPORT

Bureau of Crime Strategy and Accountability

Chicago Police Department

Date of Incident	Time of Incident	Incident Type
------------------	------------------	---------------

RD No.	Event
--------	-------

Requester's Name	Star No.	Unit No.
------------------	----------	----------

Reason for Request (court evidence, subpoena, etc.)

Camera POD No.	Location	Camera Mode <input type="checkbox"/> Manual <input type="checkbox"/> Fixed <input type="checkbox"/> Auto
----------------	----------	---

Technician's Name	Star No.	Unit No.
-------------------	----------	----------

Date/Time CD made	Download Performed <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, Inventory No.	Unit of Inventory
-------------------	--	-----------------------	-------------------

If No, Reason for not downloading

- Obstructed View Inclement Weather Manual Mode (Not on incident location)
 Technical Difficulty Location not within sight Past Retention Period
 Other (Specify) _____

Investigation Completed by	Was a Supplemental Case Report Completed <input type="checkbox"/> Yes <input type="checkbox"/> No
----------------------------	--

Additional Copies Provided to: (Check all appropriate areas)

- ISD BCSA Detective Division (Name)

Supervising Sergeant

CPD-21.967(10/05)