

DIGITAL EVIDENCE SUBMISSION

BUREAU OF DETECTIVES/AREA TECHNOLOGY CENTER
CHICAGO POLICE DEPARTMENT

ATC TICKET NUMBER

AREA TECHNOLOGY CENTER USE ONLY

RECEIVED BY	DATE/TIME	DETECTIVE-STAR-BEAT
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A. CASE/OFFENSE INFORMATION

NOTE: Requesters please complete Sections A through G.

UNIT NO.	LEGAL PROCESS	OFFENSE TYPE	OFFENSE DATE/TIME
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B. REQUESTER INFORMATION

FIRST NAME	LAST NAME	STAR NO.	
EMAIL ADDRESS	UNIT	WATCH	PHONE NUMBER

C. ASSOCIATED INDIVIDUAL (If Known)

LAST NAME	FIRST NAME	M.I.	DATE OF BIRTH	ADDITIONAL INFO. (CB Number, IR Number, if needed)
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D. EVIDENCE SUBMITTED (Manufacturer, Model and Serial/IMEI number, if applicable. Warrants, or Digital Consent to Search forms must be provided with the submission of digital evidence unless the owner is deceased.)

ITEM NO.	INVENTORY NUMBER	DESCRIPTION OF ITEM(S)
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E. ANALYSIS REQUESTED (Provide a detailed statement regarding the type(s) of analysis needed. Include any possible passcodes/passwords, significant dates/identifiers, such as: birth dates, street addresses, social security number, etc.)

RD NO.

F. DIGITAL EVIDENCE (Draw an unlock pattern using arrows to indicate direction).

ITEM NO.	PASSCODE/PASSWORD			

G. SUBMITTER INFORMATION (Signature and date should be completed at the time of submission).

SUBMITTER'S NAME - STAR NO.	PHONE NO.	SUPERVISOR'S SIGNATURE - STAR NO.
SIGNATURE	DAY- MONTH - YEAR	TIME