Illinois Department of Revenue
Bureau of Criminal Investigations
Digital Evidence Item Form

		CASE			
Case Number:	Case N	Case Name: Subject / Business Name:			
Case Agent (Nan	nt (Name ID#): Forensic Examiner:				
		DESCRIP	TION	_	
Exhibit #:	Make / Model:	Serial #:		OS:	
Exhibit type:	Phone Nun	Phone Number: Phone IMEI:			
User:		Password:			
BIOS Time:	Current	Current Time: Time Z		one:	
		LAB CHAIN OF	CUSTODY	_	
Seizure Address:				Room	
Date Seized:	Seized by:	Date Received:	Received by:		
		ACQUISI"	TION	_	
Imaging Tool:	Ima	ging Type: Ima	ge MD5:	Write Blocker:	
Imaging Started:	lma	ging Finished:	lma	age SHA-256:	
Storage Type:	Stor	age Make / Model:	Serial Number:	Storage Size:	
Analysis Tool:		Additional Analysis Tool:			
		NOTE	S	_	