

# receipt of media form

Prepared at the request of counsel — privileged and confidential

Received from:

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (w) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_ Phone (h) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_

Cell (\_\_\_\_) \_\_\_\_\_ Pager (\_\_\_\_) \_\_\_\_\_ PIN \_\_\_\_\_ E-mail \_\_\_\_\_

Media Type	Serial Number	Notes

Released to:

Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Phone (w) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_ Phone (h) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_

E-mail \_\_\_\_\_

# desktop collection information form

**Prepared at the request of counsel — privileged and confidential**

The information below will assist in describing the chain of custody for the data which is collected.

Computer user: Name \_\_\_\_\_ E-mail address \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone (w) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_ Phone (h) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_  
 Cell (\_\_\_\_) \_\_\_\_\_ Pager (\_\_\_\_) \_\_\_\_\_ PIN \_\_\_\_\_ Title \_\_\_\_\_  
 ISID \_\_\_\_\_

Brought to you? Y/N If yes, by whom? Name \_\_\_\_\_  
 Phone (w) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_ Phone (h) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_  
 If not brought to you:  
 Building \_\_\_\_\_ Floor \_\_\_\_\_ Office/Cube/Mailstop \_\_\_\_\_  
 Was this the only computer in this person's area? Y/N  
 Location of computer (e.g., on desk, under desk, in leather bag) \_\_\_\_\_

Machine/drive identifiers:  
 Type (laptop, desktop, notebook, server) \_\_\_\_\_ Manufacturer \_\_\_\_\_  
 Model \_\_\_\_\_ Serial Number \_\_\_\_\_ Asset/inventory tag \_\_\_\_\_

Number of peripherals attached to the computer with the computer of interest (write 0 if none) Also, removable media in area:

Hard drives _____	CD-ROM Read-only _____
CD-ROM Read/write _____	Fax/modem _____
3.5 floppy _____	Printer ports _____
Zip/Jaz drive _____	USB ports _____
Docking station _____	Network connection _____
Floppies _____	Tapes _____
CD-ROMs _____	Zip, Jaz _____
Other not listed _____	

Notes: \_\_\_\_\_

Bios date/time \_\_\_\_\_ Actual date/time \_\_\_\_\_  
 Name of ghost image \_\_\_\_\_ Copied to network drive \_\_\_\_\_

Type of data	Name	Date collected	Collected by:
Home directory			
User computer			
E-mail			
Share 1			
Share 2			

Continue on back of sheet

Gatherer's information and signature:

Signature \_\_\_\_\_ Name \_\_\_\_\_

Gathered at the request of \_\_\_\_\_

Case identifier \_\_\_\_\_

# server information form (for Microsoft® Exchange)

Prepared at the request of counsel — privileged and confidential

Location: \_\_\_\_\_ Server: \_\_\_\_\_

## On-site contact:

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (w) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_ Phone (h) (\_\_\_\_) \_\_\_\_\_

Cell (\_\_\_\_) \_\_\_\_\_ Pager (\_\_\_\_) \_\_\_\_\_ PIN \_\_\_\_\_

E-mail (w) \_\_\_\_\_ E-mail (h) \_\_\_\_\_

## Physical Location:

Secure location? Y/N If yes, type of access (e.g., keycard, code) \_\_\_\_\_

Phone (in room) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_

Building \_\_\_\_\_ Floor \_\_\_\_\_ Room \_\_\_\_\_

Location of computer (e.g., rack #, shelf) \_\_\_\_\_

## Hardware:

Machine name \_\_\_\_\_ Manufacturer \_\_\_\_\_

Domain name \_\_\_\_\_

Model \_\_\_\_\_ Serial # \_\_\_\_\_ Asset tag # \_\_\_\_\_

Tape drive manufacturer \_\_\_\_\_ Model # \_\_\_\_\_ Serial # \_\_\_\_\_

Tape media size \_\_\_\_\_

## Time:

Bios date/time \_\_\_\_\_ Actual date/time \_\_\_\_\_

Time zone \_\_\_\_\_ Daylight savings selected? \_\_\_\_\_

## Software:

Operating system version and service pack \_\_\_\_\_

Exchange version and service pack \_\_\_\_\_

Site name \_\_\_\_\_ Organization name \_\_\_\_\_

Exmerge version \_\_\_\_\_

Backup software/version \_\_\_\_\_ Open file agent? \_\_\_\_\_

## Gather's information and signature:

Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Company \_\_\_\_\_

Phone (w) (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_ Phone (h) (\_\_\_\_) \_\_\_\_\_

E-mail (w) \_\_\_\_\_ E-mail (h) \_\_\_\_\_

# key personnel list

Prepared at the request of counsel — privileged and confidential

Location : \_\_\_\_\_

Role	Name/Department	Phone/E-mail
Top Manager		
Top IT Manager		
E-mail		
Network		
Desktop		
Security		
Help Desk		
Telecom		
Human Resources		