



## DEPARTMENT of DEFENSE COMPUTER FORENSIC LABORATORY

### FORENSIC SERVICE REQUEST

The customer agrees that by submitting this request, the laboratory will select the technical procedures needed to complete the request.

|  |  |                                 |   |                          |                           |
|--|--|---------------------------------|---|--------------------------|---------------------------|
| 1. Submitting Agency:  |  | 2. Unit:                        |   | 3. Request Date:         |                           |
| 4. Agency Case #:  |  | 5. Case Type:                   |   |                          |                           |
| 6. Case Agent:   |  | 7. Agent's Commercial Number:   |   | 8. Agent's Cell:         |                           |
| 9. Agent's Unclassified E-mail:  |  | 10. Agent's DSN:                |   | 11. Agent's Fax Number:  |                           |
| 12. Agent's Address: (Physical address for stateside)  |  |                                 |   |                          |                           |
| 13. Unit/Det Commander/Special Agent in Charge:  |  | 14. Det CO's Commercial Number: |   | 15. Det CO's Cell:       |                           |
| 16. Det CO's Unclassified E-mail:  |  | 17. Det CO's DSN:               |   | 18. Det Co's Fax Number: |                           |
| 19. Det Co's Address: (Physical address for stateside)   |  |                                 |   |                          |                           |
| 20. Classification Level of the Case:  |  |                                 | 21. Evidence Return Address:  |                          |                           |
| 22. Jurisdiction:            Military            Federal            State            Other   |  |                                 |   |                          |                           |
| 23. Next known Proceeding Date: (If scheduled)   |  |                                 | 24. Type of Proceeding:   |                          |                           |
| 25. Prosecutor's Name:   |  | 26. Rank:                       | 27. Office Phone:   |                          | 28. DSN:                  |
| 29. Prosecutor's Address:  |  |                                 | 30. Prosecutor's Unclassified E-mail:   |                          |                           |
| 31. Subject's Name:  |  | 32. Birthday:                   | 33. Prosecutor's Fax Number:  |                          | 34. Pretrial Confinement? |
| 35. Deceased/Victim Name:  |  | 36. Birthday:                   |   |                          | Yes      No               |
| 37. Type   |  |                                 | 38. Associated DCFL Case #: (Original/Previous/Follow-On)   |                          |                           |
| Initial Request    Follow-On    FDE    Trial Support   |  |                                 |   |                          |                           |
| 39. Is new evidence being submitted today with this request?<br>Yes *      No  |  |                                 | 40. Has anyone viewed/examined/accessed this evidence prior to submission?    Yes *      No         |                          |                           |
| 41. List any DCFL member consulted: *  |  |                                 | *If answered yes, please provide any notes from prior examinations.                                 |                          |                           |
| 42. Type of Search Authority:      Search Warrant            Other Consent/Permission            Government Owned  |  |                                 |   |                          |                           |
| 43. Other Investigative documents:   |  |                                 | 44. Confession/Statements:      Subject      Witness  |                          |                           |
| 45. Provide a copy of: Search Warrant, Affidavit, Written Consent, Consent Acknowledgement Form, Confession, Witness or Subject Statements, Charging Documents or any other pertinent Documentation. |  |                                 |   |                          |                           |
| 46. Signature:   |  |                                 | 47. <b>With your signature you are acknowledging and agreeing to the attached Terms of Service.</b> |                          |                           |



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48. Service Requested: Describe in detail services needed. Identify any investigative/court deadlines. Explain all checked items marked with "\*" from above.



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49. Case Background: Provide any background information relevant to this case.



**DEPARTMENT OF DEFENSE COMPUTER FORENSIC LABORATORY**  
**ACCEPTANCE OF TERMS**  
**EFFECTIVE 9 JUL 12**

**1. ACCEPTANCE OF TERMS**

The Defense Computer Forensic Laboratory (DCFL) provides its services (defined below) to you (“the Customer”) subject to the following Terms of Service (TOS), which may be updated by us, from time to time without notice to you. The most current version of the TOS will be attached to the DCFL Form 1 – Laboratory Submission Form. By filling out and signing this form you accept and agree to be bound by the terms and provision of the TOS. In addition, materials and information you submit to DCFL (such as evidence or victim information) are subject to DCFL policy guidelines and procedures applicable to such items. Policy guidelines and procedures are hereby incorporated into the TOS.

**2. DESCRIPTION OF DCFL SERVICES**

The DCFL works to ensure standardized, efficient case processing and examination to ensure customers receive the maximum benefit from examination results and other DCFL products and services. This effort is conducted using a rich collection of resources including, without limitation or minimum, various forensic and support tools, procedures, protocols, and methods that conform to accepted and standard practices in the forensic community.

The DCFL will conduct a full or limited examination of provided evidence submitted to DCFL, bounded by the terms outlined by customer on the DCFL Form 1 and in accordance to DCFL standard operating procedures and instructions, and to the extent of the DCFL’s capabilities.

Where a case submission requires equipment to be ordered for processing, any remainder of work on the case will be processed separately. Should the required equipment be unavailable, this fact will be communicated with the customer and the media unable to be processed will be returned to the customer unexamined.

Case submissions with special devices (e.g. cell phone, PDA, Xbox) will be processed in a manner to prevent unnecessary holdups in the completion of the case examination, and provide the customer with key case information most expediently.

Evidence sent to the DCFL requiring a damaged media recovery (DMR) procedure to be performed will not be processed until all necessary equipment is in place. This can, at times, mean a lengthy period of time may elapse before evidence is processed.

**3. GENERAL PRACTICES REGARDING CASE PROCESSING**

From time to time DCFL may deviate from its standard processes in order to use the most efficient and practicable solution to serve the customer.

**4. YOUR SUBMISSION OBLIGATIONS**

When requesting a case to be processed by the DCFL, the Customer must complete a Form 1 in order to outline the services requested, media submitted, and key background information relevant to the investigation. This will assist DCFL analysts in pinpointing useful data, depth of examination requested, and other pertinent information regarding the request. Customers will also ensure classification markings of individual items and overall collections are quickly and readily identifiable.

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The following items must be included with submitted evidence for DCFL to perform an examination:

- Completed and signed DCFL Form 1 – Laboratory Submission Form
- Search authority documentation
- Evidence listing
- Chain of custody document(s)
- Customer reference numbers for evidence, as required by customer regulations
- Notes on Form 1 regarding media that has been damaged prior to shipment to DCFL; also, which person in a case each piece of evidence is associated with, if known (e.g. subject's thumb drive, victim's laptop, etc.)
- All electrical charge cords, download cords, passwords to files/devices (e.g. from a Post-It note of passwords located near the device at a crime scene, or ones given up by subjects during interviews), devices on which a piece of media was created (e.g. a video camera to go with a home video tape), and any other related equipment or information that would increase probability of full access to case-relevant data
- The following must be provided if they exist:
  - Witness statements and/or discussions
  - Subject statements
  - Copy of charge sheet(s)
  - Notes detailing any prior analysis conducted by someone outside DCFL (if applicable)

**5. FORENSIC DATA EXTRACTION SUBMISSIONS**

Case submissions for the post FDE processing require additional documentation. Customers submitting this type of examination must provide the following additional documentation:

- Documentation noting that a pediatrician has viewed the selected objects
- Documentation noting the case has undergone legal review
- Documentation noting the case has been sent to the National Center for Missing and Exploited Children (NCMEC)
- The following must be provided if they exist:
  - Witness statements and/or discussions
  - Subject statements
  - Copy of charge sheet(s)

**6. MISSING OR ADDITIONAL INFORMATION**

You agree that DCFL may contact you at any time to request missing or additional information in order to perform an examination on a case. You agree that if this information is not provided, or if after a reasonable period of three business days such requests for information are not met, DCFL has the right to return materials submitted to DCFL unexamined.

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**7. GENERAL PRACTICES REGARDING EVIDENCE AND CASE INFORMATION**

Strict safeguards are in place for the protection of information and confidentiality of customer information, regardless of how obtained or media in which the information is conveyed (e.g., printed, electronic files, email, or verbal conversation). Information will not be disseminated by DCFL without prior approval from the customer.

Strict evidence handling and storage procedures will be conducted by the laboratory at all times.

DCFL takes exacting care in ensuring its processes do not damage or destroy evidence. However, should this event occur, the customer will be notified as soon as the alteration is recognized.

Discrepancies in evidence will be double checked according to DCFL procedures, and once the discrepancy is verified, the customer will be contacted for resolution. The actions taken in the resolution of evidence discrepancies will be documented and recorded in the case file.

**8. COMMUNICATION**

The DCFL shall be willing to cooperate with the customer or its representatives in clarifying the customer's request and in monitoring DCFL's performance in relation to the work performed, while ensuring confidentiality for the customer and all other customers.

As soon as practical after receiving a case, DCFL shall complete and send a DCFL Case Receipt Acknowledgement e-mail. A DCFL section chief, the deputy laboratory director, and the case agent's Computer Crime Operations Chief shall be copied on the acknowledgement e-mail.

Further case correspondence, whether by e-mail, fax, mail, or notes/voice recordings of telephone conversations, shall be noted and recorded to be included for record in the case file.

**9. NOTICE**

You agree that DCFL's use of the ASCLD/LAB name and symbol are trademarks and the property of ASCLD/LAB. Without ASCLD/LAB's explicit prior permission, you agree not to display or use in any manner the ASCLD/LAB name or symbol.