



DriveQuest Preview Checklist



Case Title _____ Case ID _____

Investigator _____ Agency _____ Squad/Unit _____

Data thumb drive wiped prior to this preview

Wiped By: _____ Date/Time _____

Thumb Drive Brand: _____

Thumb Drive Size: 8GB 16GB _____

Processing Date: _____ Start Time: _____ End Time: _____

Subject computer description:

Make: _____
Model: _____
Serial Number: _____

Operating System: _____
USB Ports: YES NO
CD/DVD drive: YES NO
Internal Hard Drives*: _____

External Hard Drives*: _____

Thumb drives*: _____

Notes: _____

* List make/model/serial number/size for each device

Configuration File Setting Change:

Search Terms Added:

Other Comments:

