# Sample Evidence Collection Checklist

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Part I: Testimony and Background Evidence | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | Psychological/psychiatric evaluation (when consent, undue influence, or capacity may be an issue) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | Victim testimony or deposition with full-cross examination, as soon as possible after charging (*Crawford v. Washington*) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | **Videotape** the victim at the early stage of the investigation, including the following: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | 🞎 | | | Orientation—victim’s perception of time, place, and person | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | 🞎 | | | **Facts**: | | | | | | | |  | | | |  | | | | | | |  | | | | | | |  | | |  |
|  | | | |  | | 🞎 | | | | | Consent | | | |  | | | | |  | | | | | |  | | | | | |  | | |
|  | | | |  | | 🞎 | | | | | Identity of Suspect | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | 🞎 | | | | | Review documents/evidence. Have victim sign his or her name in video to compare to signature on questioned documents. | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | 🞎 | | | | | Impact of Crime. Include a walk-through video of a neglect or abuse crime scene if possible | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | **Medical evidence, including**: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | 🞎 | | | Medications. Include actual bottles/containers for prescriptions to show physician and pharmacy, possession and full/empty status given recommended dosage over time from the date of the last refill. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | 🞎 | | | | Medical records of current and underlying conditions | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | Sources of Information: | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | 🞎 | | Emergency Room | | | | | | | | | | | 🞎 | | | | Treating physicians | | | | | | | |
|  | | | |  | | | | | | 🞎 | | Nursing facilities | | | | | | | | | | | 🞎 | | | | Pharmacy | | | | | | | |
|  | | | |  | | | | | | 🞎 | | Dentists | | | | | | | | | | | 🞎 | | | | Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | |
|  | | | |  | | | | | Specific Types of Documents to Request: | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | 🞎 | | Lab reports | | | | | | | | | | | 🞎 | | | | Nurses’ notes | | | | | | | |
|  | | | |  | | | | | | 🞎 | | X-rays | | | | | | | | | | | 🞎 | | | | Social workers’ notes | | | | | | | |
| 🞎 | | | Adult Protective Services (APS) records of current and prior contacts | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | All law enforcement contacts with involved parties and witnesses, including: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | 🞎 | | | 911 tapes | | | | | | | | 🞎 | | Arrest reports | | | | | | | | | | | |  | | 🞎 | | | Criminal histories | |
| 🞎 | | | Jail records, including 🞎 Phone calls 🞎 Visitor logs by or on behalf of suspects | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | **Financial records** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | 🞎 | | | Credit card records | | | | | | | | | | | 🞎 | | | | Investment account records | | | | | | | | | | | | | |
|  | | | 🞎 | | | Credit reports | | | | | | | | | | | 🞎 | | | | Suspect’s bank records | | | | | | | | | | | | | |
|  | | | 🞎 | | | Victim’s bank records | | | | | | | | | | | 🞎 | | | | Checkbook registers | | | | | | | | | | | | | |
| 🞎 | | | **Legal documentation** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | 🞎 | | | Powers of attorney | | | | | | | | | | | | | | | | | | | 🞎 | | | | Prior civil cases | | | | | |
|  | | | 🞎 | | | Court/protection orders | | | | | | | | | | | | | | | | | | | 🞎 | | | | Wills and trusts | | | | | |
|  | | | 🞎 | | | Property deeds | | | | | | | | | | | | | | | | | | | 🞎 | | | | Conveyances | | | | | |
|  | | | 🞎 | | | Advanced care directives/living wills | | | | | | | | | | | | | | | | | | | 🞎 | | | | Guardianship/conservatorship documents | | | | | |
| 🞎 | | | **Consultation with Experts** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | 🞎 | | | Handwriting analysts | | | | | | | | | | | | 🞎 | | | | Geriatricians | | | | | | | | | | | | |
|  | | | 🞎 | | | Forensic accountants | | | | | | | | | | | | 🞎 | | | | Geriatric psychologists and psychiatrists | | | | | | | | | | | | |
|  | | | 🞎 | | | Wound care experts | | | | | | | | | | | | 🞎 | | | | Medical examiner | | | | | | | | | | | | |
|  | | | 🞎 | | | Civil attorneys | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | |

# sample Evidence Collection Checklist

|  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Part II: Interviews and Physical Evidence | | | | | | | | | | | | |
| 🞎 | **Interviews** | | | | | | | | | | | |
|  | 🞎 | | Witnesses who can describe the victim’s condition, activities, and level of functioning and interaction with the defendant at time of incident and before. Include a description of changes over time. | | | | | | | | | |
|  | |  | | **Possible witnesses**: | | | | | | | | |
|  | |  | | | | 🞎 | | Family and friends | 🞎 | | Acquaintances/social | |
|  | |  | | | | 🞎 | | Banking/financial | 🞎 | | Medical providers (prior and current) | |
|  | |  | | | | 🞎 | | Hair stylists/barbers | 🞎 | | Faith community | |
|  | |  | | | | 🞎 | | Local businesses | 🞎 | | Neighbors | |
|  | |  | | | | 🞎 | | Adult day care services | 🞎 | | Social services (Meals on Wheels, etc.) | |
|  | |  | | | | 🞎 | | Adult Protective Services | 🞎 | | Payees for expenses the suspect paid with the victim’s money | |
|  | |  | | | | 🞎 | | Civil attorneys |  | |  | |
|  | |  | | | **Various community “gatekeepers**”: | | | | | | | |
|  | |  | | | | 🞎 | | Delivery personnel | 🞎 | | Postal carriers | |
|  | |  | | | | 🞎 | | Meter readers | 🞎 | | Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 🞎 | **Physical evidence - include an inventory** | | | | | | | | | | | |
|  | 🞎 | | Photo and video documentation | | | | | | | | | |
|  | |  | 🞎 | | | | Crime scene, including, if relevant: | | | | | |
|  | |  | 🞎 | | | | Contents of refrigerator, cupboards, medicine cabinets [include actual bottles/containers for prescriptions to show physician and pharmacy, possession and full/empty status given recommended dosage over time from the date of the last refill]. | | | | | |
|  | |  | 🞎 | | | | Suspect’s living area | | | | | |
|  | |  | 🞎 | | | | Victim’s living area | | | | | |
|  | |  | 🞎 | | | | Major new purchases made by the suspect | | | | | |
|  | |  | 🞎 | | | | Victim’s body | | | | | |
|  | |  |  | | | | 🞎 Injuries over time | | | | | |
|  | |  |  | | | | 🞎 Other signs of neglect | | | | | |
|  | 🞎 | | Clothing victim was wearing at time of incident (include adult diapers if applicable) | | | | | | | | | |
|  | 🞎 | | Bedding | | | | | | | 🞎 | | Locks on outside of doors |
|  | 🞎 | | Writings/journals/letters | | | | | | | 🞎 | | Photos and videos related to conduct |
|  | 🞎 | | Address books and calendars | | | | | | | 🞎 | | Defendant’s and victim’s ISP records |
|  | 🞎 | | Defendant’s computer, flash drives, etc. | | | | | | | 🞎 | | Medications and medical supplies |
|  | 🞎 | | Legal file from victim’s civil attorney | | | | | | | 🞎 | | Assistive devices (or lack thereof) |
|  | 🞎 | | Nutritional supplements | | | | | | | 🞎 | | Receipts for purchases |
|  | 🞎 | | Restraints and bindings | | | | | | | 🞎 | | Checkbooks, check registers |