

CERTIFICATE U/S. 63(4)(a)(c) OF BHARATIYA SAKSHYA ADHINIYAM 2023

Part A

(To be filled by the Party)

- 1) I, _____ Son/daughter/spouse of _____
residing/employed at _____

do hereby solemnly affirm and sincerely state and submit as follows:

- 2) I have produced electronic record / output of the digital record taken from the following device/digital record source (tick mark): Computer / Storage Media DVR Mobile Flash Drive CD/DVD Server Cloud Other If Other Please Specify _____

S. No	Type of Device (Computer/Mobile/Pen Drive/Other)	Make/Model/Color/SN/IMEI/UIN/MAC/Cloud ID/	Used by / Belonging to
1	Mobile	Make: Model: IMEI1: IMEI 2: Serial No.: Colour:	
2	Mobile	Make: Model: IMEI1: IMEI 2: Serial No.: Colour:	

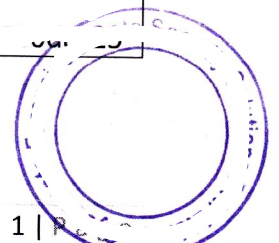
- 3) The digital device or the digital record source was under the lawful control for regularly creating, storing or processing information for the purposes of carrying out regular activities and during this period, the computer or the communication device was working properly and the relevant information was regularly fed into the computer during the ordinary course of business.
- 4) If the computer/digital device at any point of time was not working properly or out of operation, then it has not affected the electronic/digital record or its accuracy. The digital device or the source of the digital record is:
Owned Maintained Managed Operated by

- 5) I state that the HASH value/s of the electronic/digital record/s is

S. No.	Device Name	MD5	SHA1
1.	USB Device		

obtained through the following algorithm:

- SHA1:
 SHA256:



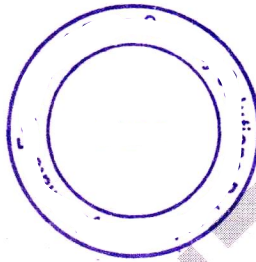
-
- MD5:
 - Other _____ (Legally acceptable standard)
(Hash report to be enclosed with the certificate)

(Name and signature)

Date (DD/MM/YYYY): 28/09/2024

Time (IST): 19:00 hours (In 24 hours format)

Place: Pune



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Part B

(To be filled by the Expert)

1) I, _____ Son/daughter/spouse of _____ employed at _____ do hereby solemnly affirm and sincerely state and submit as follows:

2) I hereby issue this certificate as per your request letter dated _____

3) The produced electronic record/output of the digital record are obtained from the following device/digital record source (tick mark):

Computer / Storage Media DVR Mobile Flash Drive CD/DVD
 Server Cloud Other If Other Please Specify _____

S. No	Type of Device (Computer/Mobile/Pen Drive/Other)	Make/Model/Color/SN/IMEI/UIN/MAC/Cloud ID/	Used by / Belonging to
1	Mobile	Make: Model: IMEI1: IMEI 2: Serial No.: Colour:	
2	Mobile	Make: Model: IMEI1: IMEI 2: Serial No.: Colour:	

4) I state that the HASH value/s of the electronic/digital record/s is

S. No.	Device Name	MD5	SHA1
1.	USB Device		

obtained through the following algorithm:

SHA1:

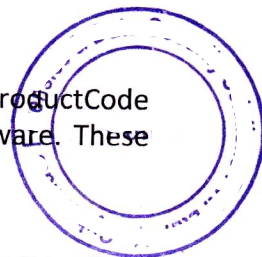
SHA256:

MD5:

Other _____ (Legally acceptable standard)

(Hash report to be enclosed with the certificate)

The acquisition of the above-mentioned device has been done in the VendorCo ProductCode USB Device (16 GB) using MobilEdit Forensics Express Software & iMazing Software. These devices have been marked as Ex - 1 having Serial Number as follows:



Mobile Device Collection Form

Hash Value report of _____

Date: _____

Time: _____

Examiner's Name and Details

Name of Digital Evidence Examiner: _____

Case Information: For various private cases.

Evidence Information

System State

If Switched On, what is visible on Screen?

On Off Hibernation/Sleep

Lock Screen

System Info

Make: _____

Model: _____

Mobile Type: GSM CDMA 3G 4G 5G

Time Zone Settings:

Date/Time of Mobile Phone: _____

Actual Date/Time: _____

IMEI Number

IMEI 1: _____

IMEI 2: _____

Mobile Serial Number (If any)

Is the SIM Card Present?

Yes No

SIM Services Provider Name: _____

Shut Down Type

Normal Battery pulled

Details of Imaging Software/Version to be Given: FTK Imager & MobilEdit Forensics Express Pro

Is the Hash Value Calculated?

Algorithm:

Yes No

MD5 SHA1 Others

MD5 checksum: _____

SHA1 checksum: _____

Other Authentication Methods: *NA*

SIM Card

Phone Internal Storage

Phone External Storage/ SD Card

Mobile Data

Engineer Signature: _____

Mobile Device Collection Form

Hash Value report of .

Date:

Time: .

Examiner's Name and Details

Name of Digital Evidence Examiner:

Case Information: For various private cases.

Evidence Information

System State

If Switched On, what is visible on Screen?

On Off Hibernation/Sleep

Lock Screen

System Info

Make:

Model:

Mobile Type: GSM CDMA 3G 4G 5G

Time Zone Settings:

Date/Time of Mobile Phone:

Actual Date/Time:

IMEI Number

IMEI 1:

IMEI 2:

Mobile Serial Number (If any)

Is the SIM Card Present?

Yes No

SIM Services Provider Name:

Shut Down Type

Normal Battery pulled

Details of Imaging Software/Version to be Given: FTK Imager & MobilEdit Forensics Express Pro

Is the Hash Value Calculated?

Yes No

Algorithm:

MD5 SHA1 Others

MD5 checksum:

SHA1 checksum:

Other Authentication Methods: NA

SIM Card

Phone Internal Storage

Phone External Storage/ SD Card

Mobile Data

Engineer Signature: _____

Chain Of Custody Form

Date:		Time:		
Description of Evidence:				
Chain of Custody				
Date & Time	Received From	Received By	Reason/Action	Sign of Receiver
			For Forensic Imaging	
			Safe Custody	

Chain Of Custody Form

Date:		Time:		
Description of Evidence:				
Chain of Custody				
Date & Time	Received From	Received By	Reason/Action	Sign of Receiver
			For Forensic Imaging	
			Safe Custody	

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