



Law Enforcement Request

EM Court Orders and this form to: CourtOrders@Subsentio.com

Telephone: 720-213-5735

Facsimile 866-217-4097 (LAES Only)

Law Enforcement Agency

[Note: Please fill in this section completely and legibly.]

Law Enforcement Agency: _____

Address of LE Agency: _____

Primary Point of Contact – Case Agent/Officer: _____

Title: _____ Telephone: _____

Mobile Telephone: _____ Facsimile: _____

E – mail Address: _____

Technical Point of Contact: _____

Title: _____ Telephone: _____

Mobile Telephone: _____ Facsimile: _____

E – mail Address: _____

Administrative Assistant (Billing, etc.): _____

Telephone: _____ Facsimile: _____

Mobile Telephone: _____

E – mail Address: _____

Court Order

Court Order Number: _____

Issuing Authority (Court): _____

Name of Signatory: _____ Date Signed: _____

Surveillance Start Date/Time: _____ End Date/Time: _____

Administrative – Target

Agency Case Identifier (Case #): _____

Type of Target Communication (Check as appropriate):

- Wire Line** **Wireless** **Packet-data**
 VoIP **Broadband/Internet** **LTE**

Other (please specify): _____

Who is the Service Provider? _____

What unique identifier(s) can you provide?:

10 digit telephone number (Criminal Matters): _____

“Last Four” Only (FISA Matters): _____

MDN, ESN, IMSI: _____

Static IP address or Authentication credentials: _____

Other: _____

What intelligence is most important to you? (subject location, dialed digits, call content):

What is the urgency (truly life or death?):

Monitoring Information

Monitoring Agency: _____

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Is this intelligence routed through your Headquarters? (Y/N): _____

If no, other routing agency?: _____

Primary Point of Contact there: _____

Telephone: _____ Mobile Phone: _____

E – Mail Address: _____

Call Content Delivery (if separated): Method: CBIS T1 IP/Port

Dialed Number for content delivery?: _____

VPN Peer address: _____ Proxy ID's/Inside addresses: _____

Comment: _____

Billing Information

Send Invoice for Services To:

Name: _____

Street Address: _____

Postal Box: _____

City, State, Zip: _____

Note: Subsentio invoices are sent in a white envelope with NO corporate markings. The envelope will be addressed exactly as you have indicated above.

Would you prefer to have you invoice sent to you by e-mail?: (Y/N) _____

What e-mail address should we use?: _____

How shall we clearly identify this case for you? (on the billing invoice):
