



Evidence Cover Letter

Claimant name _____

WCB number(s) _____

Number of flash drives _____

Number of files on each drive _____

For each file, provide the following information:

- Entire file name (e.g., SmithVideo-20211201.MP4, SmithVideo-20211208.MP4, etc.)
- Description of file content (e.g., surveillance video on 4/4/22, or investigation report dated 4/5/22)
- Size of file

Note: Accepted video formats: .mp4, .avi, .mkv, .wmv, and .mpeg. Accepted document formats: .txt, .pdf, .doc, and .docx. Executable files (.exe) will not be accepted due to security concerns.

Number of paper files (if any) _____

For each paper document, provide the following information:

- Number of pages
- Description of document contents (e.g., color pictures of facial disfigurement 4/5/22, or investigation report dated 4/5/22)

Submitter name _____

Organization name _____

Email _____

Phone number _____

Date _____

For full details, view [Subject Number 046-237R2](#) on the Board's website.