



**The State Bar of California
Special Master Program**

www.calbar.org/specialmaster

180 Howard Street, San Francisco, CA 94105-1639 / Phone: (415) 538-2454

Submit by Email: specialmaster@calbar.ca.gov or FAX: (415) 538-2305

Special Master Search Summary Form

Special Master Information
Name:
State Bar Member #:
Email Address:

Search Information
Agency requesting warrant:
Court:
Judge:
Date assigned:
Date of search:
County where search performed:

Type of Location Searched	
Law Office <input type="checkbox"/>	Physician's Office <input type="checkbox"/>
Mental Health Professional <input type="checkbox"/>	Clergy <input type="checkbox"/>
Other <input type="checkbox"/>	Date material delivered:
Judge/Officer to whom privileged materials delivered:	

Note:
Penal Code Section 1537 requires that you keep a copy of the search inventory for your records. DO NOT send the inventory sheet to the State Bar of California.

Signature
Name (printed):
Signature:
Date: