

Special Master Search Summary Form



State Bar of California
Special Master Program
www.calbar.org/specialmaster
Phone: (415) 538-2454

Submit To:
Email: specialmaster@calbar.ca.gov
FAX: (415) 538-2305
Mail: The State Bar of California
Office of the Secretary – SM
180 Howard Street
San Francisco, CA 94105-1639

Special Master Information

Name	
State Bar Member #	
E-Mail Address	

Search Information

Agency Requesting Warrant:	
Court:	
Judge:	
Date assigned:	Date of search:
County Where Search Performed:	
Type of Location Searched	
<input type="checkbox"/> Law Office	<input type="checkbox"/> Physician's Office
<input type="checkbox"/> Mental Health Professional	<input type="checkbox"/> Clergy
<input type="checkbox"/> Other	
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	