

QUABBIN VALLEY PARANORMAL

Investigating the Paranormal in New England Since 2007

CASE #: _____

Investigation Cover Sheet

Case Information		Property Description	
Case Number			
Case Manager			
Case Intake Date			
Invest Date(s)			
Site Information		Client Contact Information	
Street Address		Name	
Town/City		Primary Phone	
Zip Code		Secondary Phone	
Location Type		Email Address	

Documents Completed/Received			
Client Package		Confidentiality	
Client Agreement		Intake Complete	
Follow Up/Reveal			

Initial Site Investigation Team/Guests		
Position	Name	Contact Number
Team Leader		
Tech. Primary		
Investigator		
Investigator		
Investigator		

Time Documentation			
Time on Site		Time Off Site	

Team Leader (Printed)	Team Leader Signature	Date