

7/31/98

FD-759 (Rev. 5-25-95)

To: Director, FBI ()
Attn: CID, NIPC-CID Section

From: SAC, CINCINNATI (208-CI-60562)

For FBI Field Office use only
CM#:

Title: UNSUB(S);
UCAP
INSTITUTE OF TECHNOLOGY
HACKING ATTACK ON
[Redacted]

Notification of SAC Authority Granted for Use of
CONSENSUAL Monitoring Equipment
(Check only ONE) AUG 01 11 09 20
 Routine Use
 Emergency Use Sensitive Circumstances (cannot exceed
30 days & may be extended only by FBIHQ). b7E

This form must be typewritten & submitted within 10 working days
of the date authority is granted as shown in Item 5 below.

1. Reason for Proposed Use: (Check) <input type="checkbox"/> Corroborate Testimony <input type="checkbox"/> Protect Consenting Party <input type="checkbox"/> Protect Government Property <input checked="" type="checkbox"/> Collect Evidence		2. Type of Equipment: (Check) <input type="checkbox"/> Transmitter/Receiver <input type="checkbox"/> Concealed Recorder <input type="checkbox"/> CCTV/Audio & Video <input type="checkbox"/> CCTV Video only <input type="checkbox"/> Microphone <input type="checkbox"/> Telephone <input checked="" type="checkbox"/> Other (Specify) <u>Network Monitor</u>	
3. Consenting Party (Identify ONLY on Field Office Copy) <input checked="" type="checkbox"/> Nonconfidential Party <input type="checkbox"/> Confidential Source <input type="checkbox"/> Cooperative Witness		4. Interceptee(s): (Include Title if Public Official) <u>Wright State University, College of Engineering & Computer Science</u> & others as yet unknown.	
5. Duration of proposed use: Authorized On: _____ <input checked="" type="checkbox"/> For the duration of investigation <input type="checkbox"/> For 30 days (Emergency NTCM usage) Expiring On: _____	6. Equipment Concealed: <input type="checkbox"/> In a Motel Rm. <input type="checkbox"/> In a Telephone <input type="checkbox"/> In a Residence <input type="checkbox"/> On a Person <input type="checkbox"/> In a Vehicle <input checked="" type="checkbox"/> Other (Specify) <u>Secured Network Room</u>	7. City & State where Equipment will be used: <u>Dayton, Ohio</u>	
8. The following mandatory requirements have been met: <input checked="" type="checkbox"/> Consenting party has agreed to testify; <input checked="" type="checkbox"/> Consenting party has executed a consent form; & <input checked="" type="checkbox"/> Recording/transmitting device will be activated only when consenting party is present.		9. Government Attorney in judicial district where monitoring and/or recording will take place has been contacted; foresees no entrapment; & concurs in the use of the technique. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Date of Contact: <u>8/17/98</u> Identity of Gov't Atty: <u>RUSA</u> [Redacted] b6 Judicial District: <u>Southern District of Ohio</u> b7C	
10. Violation(s): Title(s) <u>18</u> Sec(s) <u>1030</u> USC			
11. DOJ notification required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No. If "Yes" check reason below: NOTE: Requests for Routine NTCM usage involving any of the 7 sensitive circumstances requires a teletype to HQ prepared in the format described in the MIOG, Part II, Section 10-10.3 (8). Request for Emergency NTCM usage involving Item 6 below requires immediate contact with the FBIHQ substantive desk for DOJ approval. The 7 sensitive circumstances do not apply to the use of CCTV video only. 1. <input type="checkbox"/> Interception relates to an investigation of a member of Congress; a Federal Judge; a member of the Executive Branch at Executive Level IV or above; or a person who has served in such capacity within the previous 2 years. 2. <input type="checkbox"/> Interception relates to an investigation of any public official and the offense investigated is one involving bribery; conflict of interest; or extortion relating to the performance of his/her official duties. 3. <input type="checkbox"/> Interception relates to an investigation of a Federal law enforcement official. 4. <input type="checkbox"/> Consenting/nonconsenting party is a member of the diplomatic corps of a foreign country. 5. <input type="checkbox"/> Consenting/nonconsenting party is or has been a member of the Witness Security Program and that fact is known to the agency involved or its officers. 6. <input type="checkbox"/> Consenting/nonconsenting party is in the custody of the Bureau of Prisons or the U.S. Marshals Service. 7. <input type="checkbox"/> Attorney General; Deputy Attorney General; Associate Attorney General; Assistant Attorney General for the Criminal Division; or the U.S. Attorney in the district where an investigation is being conducted has requested the investigating agency to obtain prior written consent for making a consensual interception in a specific investigation.			
12. Synopsis of Case: (Attach additional page if necessary) <u>Please see attached.</u>			

13. Justification statement necessitating emergency authorization:
 Emergency 30 day authorization granted due to imminent need (within 48 hours) for use of consensual monitoring device(s), which precluded the handling of this request in the usual manner.
 Other (Attach Additional Page to Specify)

1-Government Attorney's Office

Attn: _____

COPY 4

Field Approval	
14. CDC (If Sensitive Circumstances Exist) Signature _____ Date: _____	
15. SAC Signature _____ Date: _____	
FBIHQ Approval	
16. Unit Chief (If Sensitive Circumstances Exist) Signature _____ Date: _____	