



COUNTY OF ALLEGHENY

STOLEN SECURITIES CLEAN - NCIC ENTRY WORKSHEET

*AGENCY NAME:	*OFFICER NAME:	*AGENCY (ORI):
*DATE OF REPORT:	*DATE OF THEFT (DOT):	*INVESTIGATIVE REPORT NUMBER (OCA):

SINGLE STOLEN SECURITY - ES

*TYPE (TYP):	*SERIAL NUMBER (SER):
*DENOMINATION (DEN):	*ISSUER (ISS): DATE OR SERIES YEAR (SDT):
*OWNER (OWN):	SOCIAL SECURITY NUMBER (SOC):
LINKAGE AGENCY IDENTIFIER (LKI):	LINKAGE AGENCY CASE NUMBER (LKA):
NOTIFY ORIGINATING AGENCY (NOA):	RANSOM MONEY INDICATOR (RMI):

CONSECUTIVELY SERIALIZED STOLEN SECURITIES - ESS

*TYPE (TYP):	*DENOMINATION (DEN):
*BEGINNING SERIAL NUMBER (SER):	*ENDING SERIAL NUMBER (SER):
*ISSUER (ISS):	
*OWNER (OWN):	
*SOCIAL SECURITY NUMBER (SOC):	DATE OR SERIES YEAR (SDT):
LINKAGE AGENCY IDENTIFIER (LKI):	LINKAGE AGENCY CASE NUMBER (LKA):
NOTIFY ORIGINATING AGENCY (NOA):	RANSOM MONEY INDICATOR (RMI):
MISCELLANEOUS (MIS):	

COMPLETED BY ENTERING AGENCY

CLEAN /NCIC RECORDS CHECKED TO OBTAIN ADDITIONAL INFORMATION, ADDITIONAL INFORMATION PROVIDED TO INVESTIGATING AGENCY: Y N	
ENTERED BY:	CHECKED BY:
DATE / TIME ENTERED:	CAD EVENT #:
COPY OF ENTRY PROVIDED TO REQUESTING AGENCY:	
DATE / TIME CLEARED-CANCELLED:	CANCELLING OFFICER: