



COUNTY OF ALLEGHENY

WANTED PERSON CLEAN/NCIC WORKSHEET

*TYPE OF ENTRY: WANTED PERSON TEMPORARY FELON JUVENILE

*AGENCY NAME: *OFFICER NAME: *AGENCY (ORI):
*DATE OF REPORT: *INVESTIGATIVE REPORT NUMBER (OCA):
CAUTION INDICATOR: CAUTION/MEDICAL CONDITIONS (CMC):

WANTED PERSON INFORMATION:

*NAME (NAM): *SEX (SEX): *RACE (RAC):
*HEIGHT (HGT): *WEIGHT (WGT): *HAIR COLOR (HAI):
*OFFENSE CODE (OFF):
*DATE OF WARRANT (DOW): *EXTRADITION LIMITATIONS (EXL):

*(AT LEAST ONE) DATE OF BIRTH (DOB): SOCIAL SECURITY NUMBER (SOC):
FBI NUMBER (FBI): MISCELLANEOUS NUMBER (MNU):

DRIVER OPERATOR LICENSE INFORMATION: (AND/OR AT LEAST ONE SET)

OPERATOR'S LICENSE NUMBER (OLN): STATE (OLS): YEAR (OLY):
LICENSE PLATE NUMBER (LIC): STATE (LIS):
YEAR (LIY): TYPE (LIT):
VEHICLE IDENTIFICATION NUMBER (VIN):
VEHICLE YEAR (VYR): MAKE (VMA): MODEL (VMO):
STYLE (VST): COLOR (VCO):

OPTIONAL FIELDS:

PLACE OF BIRTH (POB): CITIZENSHIP (CTZ): ETHNICITY (ETN):
EYE COLOR (EYE): SKIN TONE (SKN):
SCARS, MARKS, TATTOOS (SMT):

FINGERPRINT CLASSIFICATION (FPC):	
ORIGINAL OFFENSE CODE (OOC)	ADDITIONAL OFFENSE (ADO):
WARRANT NUMBER (WNO):	COURT ORI (CTI):
LINKAGE AGENCY IDENTIFIER (LKI):	LINKAGE AGENCY CASE NUMBER (LKA):
NOTIFY ORIGINATING AGENCY (NOA):	DNA LOCATION (DLO):

FRADULENT DATA:

NAME (NAM):	
DATE OF BIRTH (DOB):	SOCIAL SECURITY NUMBER (SOC):
MISCELLANEOUS NUMBER (MNU):	OPERATOR'S LICENSE NUMBER (OLN):
STATE (OLS):	YEAR (OLY):

ADDRESS DATA:

DATE OF DOCUMENTED ADDRESS (DDA):	
STREET NUMBER (SNU):	STREET NAME (SNA):
CITY NAME (CTY):	STATE (STA):
COUNTY (COU):	ZIP CODE (ZIP):
ALIAS (AKA):	
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: