



* Indicates
Mandatory Field

CLEAN / NCIC WORKSHEET Wanted Person

Type of Entry: *	<input type="checkbox"/> Caution	<input type="checkbox"/> NCIC	<input type="checkbox"/> PA Only
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Agency Name: *	Officer Name: *	
ORI: *	Date of Report: *	
OCA: *	Date of Warrant: *	Offense Code: *
Date of Last Contact: *	Time of Last Contact: *	

Wanted Person Subject Information:			
Name: *	Sex: *	Race: *	
Height: *	Weight: *	Hair: *	Eyes: *
Scars, Marks, Tattoos:			
Fingerprint Class:		FBI Number:	
Date of Birth: *		SSN: *	
Jewelry Type:			
Jewelry Location:			
Blood Type:	Circumcision:	Footprints Available:	
Body X-Ray:		Corrective Vision Prescription:	
Miscellaneous Information:			

Drivers Operators License Information:		
Number:	State:	Year:
Miscellaneous Number:		

Associated Vehicle Registration Information:			
Number:	State:	Year:	Type:

Associated Vehicle Identification Information:			
Vehicle Identification Number:			
Make:	Year:	Model:	
Style:		Color:	

Investigating Agency: *	<input type="checkbox"/> A signed and sealed warrant must be available prior to entry (and attached) <input type="checkbox"/> Investigative report checked to verify information correctness <input type="checkbox"/> Investigative report checked to verify information correctness
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Items below completed by Comm Center ONLY

Above information verified by Supervisor # _____ Initials _____

Entered By:	ID #	Checked Prior to Entry by:	ID #
Date Entered:		Time Entered:	

Copy of Entry Provided To Entering Agency

Rev 02/2010

Yes No