

MONROE COUNTY CONTROL CENTER

CLEAN / NCIC WANTED PERSON WORKSHEET

TYPE OF ENTRY:	<input type="checkbox"/> CAUTION	<input type="checkbox"/> PA ONLY (EWN) – NO EXTRADITION
		<input type="checkbox"/> NCIC (EW) – ENTER EXTRADITION LIMITATIONS IN MIS FIELD
EXT: <input type="checkbox"/> YES <input type="checkbox"/> NO	EXTRADITION LIMITATIONS:	
	GRADE:	WARRANT #

AGENCY NAME:	OFFICER NAME:
AGENCY ORI:	DATE OF REPORT:
INVESTIGATIVE REPORT NUMBER (OCA):	
DATE OF WARRANT (DOW):	OFFENSE (OFF):

WANTED PERSON SUBJECT INFORMATION			
NAME (NAM):	SEX (SEX):	RACE (RAC):	
HEIGHT (HGT):	WEIGHT (WGT):	HAIR COLOR (HAR):	EYE COLOR (EYE):
PLACE OF BIRTH (POB):			
SCARS, MARKS, TATTOOS (SMT):			
BEHAVIOR DISORDERS:		DRUGS OF ABUSE:	
FINGERPRINT CLASSIFICATION (FPC):		FBI NUMBER (FBI):	
DATE OF BIRTH (DOB):		SOCIAL SECURITY NUMBER (SSN):	
MISCELLANEOUS INFORMATION (ENTER EXTRADITION IF NOT NATIONWIDE (MIS):			

DRIVER OPERATOR LICENSE INFORMATION		
NUMBER (OLN):	STATE (OLS):	YEAR (OLY):
MISCELLANEOUS NUMBER (MNU):		

ASSOCIATED VEHICLE REGISTRATION INFORMATION			
NUMBER (LIC):	STATE (LIS):	YEAR (LIY):	TYPE (LIT):

ASSOCIATED VEHICLE IDENTIFICATION INFORMATION		
VEHICLE IDENTIFICATION NUMBER (VIN):		
MAKE (VMA):	YEAR (VYR):	MODEL (VMO):
STYLE (VST):	COLOR: (VCO):	

INVESTIGATING AGENCY
<input type="checkbox"/> A SIGNED AND SEALED SEARCH WARRANT MUST BE AVAILABLE PRIOR TO ENTRY
<input type="checkbox"/> INVESTIGATIVE REPORT CHECKED TO VERIFY INFORMATION ACCURACY
<input type="checkbox"/> EXTRADITION VERIFIED THROUGH PROPER AUTHORITY

COMPLETED BY ENTERING OFFICER AND AGENCY		
OFFICER SIGNATURE:	DATE:	
ENTERED BY:	CHECKED BY:	
NIC#:	CID#	DATE / TIME ENTERED:
COPY OF ENTRY PROVIDED TO REQUESTING AGENCY: <input type="checkbox"/> YES <input type="checkbox"/> NO		

CANCELLATION INFORMATION	
OFFICER SIGNATURE:	DATE:
DISPATCHER SIGNATURE:	DOX:

BOLD AND ITALICIZED FIELDS ARE MANDATORY