

IDENTITY THEFT

CLEAN/NCIC ENTRY WORKSHEET

TYPE OF ENTRY:		<input type="checkbox"/> EID-ENTER IDENTITY THEFT <input type="checkbox"/> EIDC-ENTER IDENTITY THEFT CAUTION	
AGENCY NAME:		OFFICER NAME:	
AGENCY ORI:		DATE OF REPORT:	
INVESTIGATIVE REPORT NUMBER (OCA):			
VICTIM INFORMATION:			
NAME (NAM):	SEX (SEX):	RACE(RAC):	SKIN TONE (SKN):
PLACE OF BIRTH (POB):	DATE OF BIRTH (DOB):		
HEIGHT (HGT):	WEIGHT (WGT):	EYE COLOR (EYE):	HAIR COLOR (HAI):
FBI NUMBER (FBI):	FINGERPRINT CLASSIFICATION (FPC):		
MISCELLANEOUS NUMBER (MNU):	SOCIAL SECURITY NUMBER (SOC):		
SCARS, MARKS, TATTOOS, AND OTHER CHARACTERISTICS (SMT):			
MISCELLANEOUS INFORMATION (MIS):			
DATE OF PURGE (DOP):	NOTIFY ORIGINATING AGENCY (NOA): <input type="checkbox"/> YES <input type="checkbox"/> NO		
PASSWORD (PWD):			
IDENTITY THEFT TYPE (IDT): <input type="checkbox"/> CFRD - CREDIT CARD <input type="checkbox"/> ACCT - CHECKING OR SAVINGS ACCOUNT <input type="checkbox"/> LOAN - LOAN <input type="checkbox"/> UTIL - PHONE OR UTILITIES <input type="checkbox"/> INVT - SECURITIES OR OTHER INVESTMENTS <input type="checkbox"/> NETT - INTERNET OR EMAIL <input type="checkbox"/> GOVT - GOVERNMENT DOCUMENTS OR BENEFITS <input type="checkbox"/> OTHR - ALL OTHERS THAT DO NOT FALL INTO ANOTHER CATEGORY			
COMPLETED BY ENTERING AGENCY:			
CLEAN/NCIC RECORDS CHECKED TO OBTAIN ADDITIONAL INFORMATION, ADDITIONAL INFORMATION PROVIDED TO INVESTIGATING AGENCY			
<input type="checkbox"/> YES <input type="checkbox"/> NO			
ENTERED BY:	CHECKED BY:	DATE/TIME ENTERED:	
COPY OF ENTRY PROVIDED TO REQUESTING AGENCY:		<input type="checkbox"/> YES	<input type="checkbox"/> NO