

**JOHNSTON COUNTY E-911 COMMUNICATION**  
**NCIC ENTRY FORM**  
**Gun (Lost / Stolen / Felony / Recovered)**

**\*Mandatory Fields**

**AGENCY DATA**

\* Originating Agency Name: \_\_\_\_\_  
\* Originating Agency Code (ORI): \_\_\_\_\_

**LOST GUN / CASE DATA**

\* Agency Case Number: \_\_\_\_\_ Notify Originating Agency: \_\_\_\_\_  
\* Date of Loss: \_\_\_\_\_  
Linkage Agency Identifier: \_\_\_\_\_ Linkage Case Number: \_\_\_\_\_

**STOLEN GUN / CASE DATA**

\* Agency Case Number: \_\_\_\_\_ Hold for Prints: \_\_\_\_\_  
\* Date of Theft: \_\_\_\_\_ Notify Originating Agency: \_\_\_\_\_  
Linkage Agency Identifier: \_\_\_\_\_ Linkage Case Number: \_\_\_\_\_

**FELONY GUN / CASE DATA**

\* Agency Case Number: \_\_\_\_\_ Hold for Prints: \_\_\_\_\_  
\* Date of Theft: \_\_\_\_\_ Notify Originating Agency: \_\_\_\_\_  
Linkage Agency Identifier: \_\_\_\_\_ Linkage Case Number: \_\_\_\_\_

**GUN RECOVERED / CASE DATA**

\* Recovering Agency Identifier: \_\_\_\_\_  
\* Recovering Case Number: \_\_\_\_\_ Notify Originating Agency: \_\_\_\_\_  
\* Date of Recovery: \_\_\_\_\_  
Linkage Agency Identifier: \_\_\_\_\_ Linkage Case Number: \_\_\_\_\_

**GUN DATA (This section is mandatory with any of the above listed.)**

\* Serial Number: \_\_\_\_\_ \* Caliber: \_\_\_\_\_  
\* Make: \_\_\_\_\_ \*Type: \_\_\_\_\_  
Model: \_\_\_\_\_

**Owner Information: (This section is mandatory with any of the above listed.)**

\* Owner Name: \_\_\_\_\_  
\* Address: \_\_\_\_\_ \*City & Zip: \_\_\_\_\_

Miscellaneous:

**Information**

\* Date: \_\_\_\_\_ NIC#: \_\_\_\_\_  
\* Officer: \_\_\_\_\_ Operator: \_\_\_\_\_