* Mandatory Fields, = One Or More Of The Following Identifiers are needed

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AGENCY/CASE DATA

* Originating Agency Name: _____

* Originating Agency Code (ORI): _____   ***** Message Key: _____

* Agency Case Number: _____

  Notify Originating Agency: _____   *****Date of Last Contact: _____

* Control Field: _____   Missing Person Circumstances: _____

  Caution/Medical Conditions: _____

  Linkage Agency Identifier: _____   Linkage Case Number: _____

PERSON DATA

* Name: _____   *****Sex: _____

* Race: _____   *****Height: _____   *****Weight: _____

* Hair Color: _____   *****Eye Color: _____   Skin Tone: _____

= Date of Birth: _____   Date of Emancipation: _____   Place of Birth: _____

  Scars Marks and Tattoos: _____   = Social Security Number: _____

= Miscellaneous Number: _____   = FBI Number: _____

  Finger Print Classification: _____   Foot Print Available: _____

  Blood Type: _____   XRays Available: _____   Circumcision: _____

= License Number: _____   State: _____   Year: _____   *(If number entered, list ST & YR)*

  Vision Prescription: _____   Ethnicity (ETN):_____

  DNA Available (DNA):_____   DNA Location (DLO):_____

Jewelry Type:

Jewelry Description:

Miscellaneous:

VEHICLE DATA (If Vehicle is added, all + info in this section are mandatory fields)

= Vehicle ID Number: _____

+ Make: _____   Model: _____

+ Style: _____   Color: _____

+ Year of Manufacturer: _____

LICENSE PLATE DATA (If License Plate is added, all info in this section are mandatory fields)

= License Plate: _____   State: _____

        Year: _____   Type: _____

Information

* Date: _____   NIC#: _____

* Officer: _____   Operator: _____