

Dauphin County Department of Public Safety CLEAN/NCIC Entry Form

	STOLEN	FELONY	LOST	Hold	for Latents		VERED*	CONFISCATE	D**
MANDATOR	Y FIELDS ARI	E SHADED				(see	below)	(see below)	
DATE OF REPOR	T (YYYY/MM/DD)	AGENCY/DEPARTMENT	(ORI)		REPORTING OFFICER		DEPARTMEN	T CASE NUMBER	
SERIAL NUMBER	(SER)				1		1		
GUN MAKE (MAK)	MODEL (MOD)]				
,	,								
CALIBER (CAL)	TYPE (TYP) DA	TE OF THEFT / LOST / RECO	OVERED		I				
CALIBER (CAL)	(,	12 01 111 <u>21 17 20017 1120</u>							
LINKAGE AGENO	Y (I KI)	INKAGE CASE NUMBER (L	KV)						
LINKAGE AGENC	(LKI)	LINKAGE CASE NUMBER (E	(NA)						
									1
MISCELLANEOUS	S (MIS)								NOA
*PECOVERED	Gun was turno	d into police, found, or	othorwise loc	eated and no	etalan falany ar last	roport is on	filo		
		•				•			
	ED/SEIZED: Gun	was taken from perso	-	rom possess	sing it; and/or charge	d with a crime	e. The fields	below should be fill	led out.
NAME (NAM)		DATE OF BIRTH	I (DOB)						
OPERATOR'S LIC	CENSE NUMBER (OL	.N) LICENSE STAT	E (OLS)						
		,	(3-3)						
Decessor	by Drobibited	Doroon (DDD)	Charged	ith Crimes f	(CUC) Dawes!4	in LTC /LT	C)		
rossessea	by Pronibited	Person (PPP)	Charged w	ıını Crime (CHC) Permit	in LTC (LT	U)		