

Date of Report

Miscellaneous

## Lebanon County Department of Emergency Services Wanted Person CLEAN/NCIC Entry Form

## \*Mandatory Field

Reporting Officer

Wanted Person Temporary Felon Juvenile Caution Indicator

Police Department

Incident Number

Caution / Medical Conditions	*Name			*Sex	*Race	*Height	*Weight	*Hair Color
								Color
Offense Code	*Date of Warra	nt		*Extraditi	on Limitati	ons		
	<u> </u>							
Enter at least ONE of the follo	owing fields:		of Birth Number			urity Numb ous Numbe		
*Date of Birth	*Social Security	/ Number	*FBI Number			*Miscellaneous Number		
And/Or ONE of the followin	Lice Vehi	rator's License nse Plate Numb icle Identificatio	per with Stat n Number v	te, Year & vith Vehic	Type le Year, Ma			olor
Operator License Number	*State	*Year	*License F	Plate Num	ber *Sta	ate *\	/oor	. —
							'ear	*Type
*Vehicle Identification Number	Year	*Make	Mod	del	*Sty	/le	Color	*Type
			Mod Marks, Tatte				Color	*Type

## Upon completion, please fax the form to 717-272-9509

\*\*\*LCDES USE ONLY\*\*\*

LCDES OCA	Date Checked	Checked By	Date Entered	Entered By