

# Records Modification Form

FBI CJIS DIVISION

**REQUIRED INFORMATION:**

Master Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Originating Agency: \_\_\_\_\_

Additional Information: UCN #: \_\_\_\_\_ DOA: \_\_\_\_\_

**MODIFIED INFORMATION:** (Including any warrant#, Citation #, Agency Case #, etc)

Master Name:		Sex:	Race:		
Name at arrest:		HGT:	WGT:	EYE:	HAIR:
DOB:	SOC:	SID:			
POB:	DOO:	Agency Case #/OCA:		ORI:	
DOA:					
AKAs:					
SMTs:					
ARREST CHARGES: FROM:					
TO:					
COURT CHARGES: FROM:					
TO:					
DISPOSITIONS: FROM:					
TO:					

**ADDED INFORMATION:** (PLEASE NOTE: if adding a date of arrest, it must be accompanied with a fingerprint card)

SID	Agency Case #/OCA:	DOB:	SOC:	AKAs:	SMTs:

DOA: \_\_\_\_\_

Arrest Charges:
Court Charges:
Dispositions:

**DELETED INFORMATION:** When requesting a deletion, removal or expungement for date of arrest or individual charges/disposition please use FBI Expungement Form (FD-1114).

SID	Agency Case #/OCA:	DOB:	SOC:	AKAs:	SMTs:

DOA: \_\_\_\_\_

Arrest Charges:
Court Charges:
Dispositions:

(Provide State Bureau Stamp)