

Guidelines for Preparation of Fingerprint Cards



and Associated Documents

FOREWORD

One of the more important functions of any police activity is the processing of fingerprint images and cards, whether it deals with criminal or applicant contributors. At no time is there a higher sense of frustration than when the fingerprints obtained and submitted to the FBI have been returned because of missing, illegible, or incomplete data or the fingerprint images are of such poor quality that they cannot be processed.

This guide has been prepared to assist local, state, and federal law enforcement, governmental agencies, and authorized applicant contributors in the preparation of the FBI Criminal Fingerprint Card (Form FD-249), FBI Applicant Fingerprint Card (Form FD-258), Palm Print Card (Form FD-884), Final Disposition Report (Form R-84), and Flash/Cancellation Notice (Form I-12). Included are examples and instructions that will identify the correct manner in which data is to be recorded on the fingerprint cards, including code tables for entry of personal descriptors. Also included are instructions on how to obtain legible fingerprints.

This manual has been designed to assist you and your department in meeting its goal of receiving prompt identification services and results. It will help you to report correct and complete information in a standardized manner. This enables the FBI to process the fingerprint cards and associated documents more promptly and with less chance of error.

Listed on page 40 are non-serious (non-criterion) charges that the FBI will not process unless the fingerprint card indicates a conviction of one year or more confinement or the subject's identity is questionable. This list is not all inclusive.

The Guidelines for Preparation of Fingerprint Cards and Associated Documents should also be applied to electronic fingerprint submissions. For additional specifications and requirements for submitting electronic fingerprint submissions, please refer to the *Criminal Justice Information Services Electronic Fingerprint Transmission Specification (EFTS) Manual*.

Criminal Justice Information Services Division Mission Statement

TO REDUCE CRIMINAL ACTIVITY by maximizing the ability to provide timely and relevant criminal justice information to the FBI and to qualified law enforcement, criminal justice, civilian, academic, employment, and licensing agencies concerning individuals, stolen property, criminal organizations and activities and other law enforcement-related data.

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INTRODUCTION

PROCESSING DELAYS AND/OR REJECTION OF FINGERPRINT SUBMISSIONS

The Criminal Justice Information Services (CJIS) Division provides identification services based on fingerprint submissions. To better serve the criminal justice community, the CJIS Division is attempting to prevent delays in the processing and/or the rejection of fingerprints by addressing problems commonly encountered.

Paper fingerprint submissions must meet specific criteria to be converted into an electronic format and processed by the Integrated Automated Fingerprint Identification System (IAFIS). The following may cause a rejection or a delay in processing:

- Low quality print by dot matrix printers
- Poor penmanship
- Use of highlighter in entry block
- Entry not within boundaries of entry block
- Labels applied to "Leave Blank" areas
- Submission on non-standard fingerprint card
- Use of pencil or ink other than blue or black

Paper or electronic fingerprint submissions may also be rejected for the following reasons:

- Missing or invalid required data (e.g., date of birth)
- Fingerprints submitted for a non-criterion (non-serious) offense-See page 40
- Descriptive data not complete (e.g., name not shown at top of card)
- Charge is incomplete
- Charge lists only citation numbers
- Missing Originating Agency Identifier
- No attempt to print deformed or scarred fingers in both rolled and plain impression blocks
- More than one fingerprint impression per block (It must be indicated if an individual has extra digits, split thumbs or webbed fingers)
- Fingerprints not properly rolled or poor quality
- Fingerprints on back of fingerprint card
- Fingerprints out of sequence
- Finger(s) missing due to amputation and not noted as "AMP" or "XX" in fingerprint block
- Missing fingerprints with no reason given including the plain "flat" impressions
- More than two FBI approved "Retabs" per finger block on a paper fingerprint card

NOTE:

The CJIS Division requires that all fingerprint images be present on fingerprint submissions. This includes ten rolled impressions and four plain impressions.

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Name (NAM)

Originating Agency Identifier (ORI) Number

Date of Birth (DOB)

Sex (SEX)

Charge

Fingerprint Impressions

If any of the Required Fields are left blank, the card is rejected without further processing unless there is a quoted FBI Number.

Every effort should be made to enter the appropriate data in all of the fields (blocks) as shown on the fingerprint card. The more data entered, the better the check.

All data entered on fingerprint cards must be typewritten or legibly printed utilizing black or blue ink and must not exceed the boundaries of the designated field (block).

DATA ENTERED ON CRIMINAL FINGERPRINT CARDS

See Figures 1 and 2 on pages 10 and 11 for an example of a Criminal Fingerprint Card (FD-249)

Data Fields preceded by an asterisk (*) must be completed in order for a fingerprint card to be processed by the FBI. However, all data fields are important and should be completed if the information is known. Also, the *National Crime Information Center (NCIC) Code Manual* can be used as a reference for codes of various fields.

1. *Name (NAM) Block

Enter the name obtained from the subject in this field. Abbreviations are **not** to be used for any part of the name. The format is last name followed by a comma (,) and first and middle name, if any. Suffix denoting seniority (Jr., Sr., III, etc.) should follow the middle or first name. **Do not obstruct this area by using stamps, labels, holes or staples where the name has been printed.**

2. Signature of Person Fingerprinted Block

Obtain the signature of the person being fingerprinted, in ink.

3. Social Security Number (SOC) Block

List the subject's Social Security number, if known. Additional Social Security numbers used by the subject may be entered in the "Additional Information/Basis for Caution," block 34, on the reverse side of the fingerprint card.

4. Alias/Maiden Name (AKA) Block

List other names used by the subject that are different than the name entered in "NAM," block 1, including the signature name, using the same format (i.e., LAST, FIRST, MIDDLE SUFFIX).

If more space is needed, enter additional aliases in the "Additional Information/Basis for Caution," block 34, on the reverse side of the fingerprint card. Maiden names and all previous married names of females should be entered in the alias field, if known.

5. FBI Number (FBI) Block

Enter the assigned FBI number for the subject, if known.

6. State Identification Number (SID) Block

Enter the SID when known. Enter SID numbers with no more than ten (10) alphanumeric characters, which includes the state abbreviation (e.g., NY12345678). If labels are used for SID numbers, ensure that the label used is an appropriate size for the SID block.

When the SID number is missing from a National Fingerprint File (NFF) participant, the card will be rejected.

7. *Date of Birth (DOB) Block

Enter the DOB in month, day and year format (i.e., MM/DD/YYYY). If a complete DOB is not known, enter the approximate age followed by the statement "YEARS OF AGE".

Fingerprint cards of persons 99 years old or older are not processed by the FBI; they will be rejected immediately.

List additional dates of birth on the reverse side of fingerprint card in the "Additional Information/Basis for Caution," block 34.

NOTE: IF THE DOB BLOCK IS BLANK, AND THE CARD DOES NOT HAVE AN FBI NUMBER QUOTED, THE CARD WILL BE RETURNED TO THE STATE BUREAU/SUBMITTING AGENCY WITHOUT BEING PROCESSED.

8. *Sex (SEX) Block

Sex must be indicated by either "F" (female) or "M" (male).

NOTE: INDICATE IF THE SUBJECT IS A TRANSVESTITE (CROSS-DRESSER) OR HAS HAD A SEX CHANGE OPERATION IN THE "ADDITIONAL INFORMATION/BASIS FOR CAUTION," BLOCK 34. IN THE ALIAS (AKA) BLOCK, LIST ANY OPPOSITE-SEX NAMES USED.

9. Race (RAC) Block

Race must be indicated by one of the following one-character alphabetic characters: A = Asian, B = Black, I = American Indian, U = Unknown, and W = White

NOTE: ADDITIONAL EXPLANATIONS OF RACE CODES ARE LISTED ON PAGE 4.

- A - A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands.**
- B - A person having origins in any of the black racial groups of Africa.**
- I - A person having origins in any of the original peoples of the Americas and maintaining cultural identification through tribal affiliations or community recognition.**
- U - Of indeterminable race.**
- W - A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.**

10. Height (HGT) Block (3 characters)

Height must be expressed in feet and inches. Fractions of an inch should be rounded off to the nearest inch. Inches less than ten should be preceded by a zero. For example, five feet four inches should be submitted as “504”, and six feet even would be “600”.

11. Weight (WGT) Block (3 characters)

Weight must be expressed in pounds. Fractions of a pound should be rounded off to the nearest pound.

12. Eye (EYE) Color Block (3 characters)

Indicate eye color by entering one of the following three-character codes:

<u>If Description is:</u>	<u>List Data in Block as:</u>
Black	BLK
Blue	BLU
Brown	BRO
Gray	GRY
Green	GRN
Hazel	HAZ
Maroon	MAR
Multicolored	MUL
Pink	PNK
Unknown	XXX

13. Hair (HAJ) Color Block (3 characters)

Indicate hair color by entering one of the following three-character codes:

<u>If Description is:</u>	<u>List Data in Block as:</u>
Bald	BAL
Black	BLK
Blonde (or strawberry)	BLN
Blue	BLU
Brown	BRO
Green	GRN
Gray (or partially gray)	GRY
Orange	ONG
Purple	PLE
Pink	PNK
Red (or auburn)	RED
Sandy	SDY
White	WHI
Unknown	XXX

14. *Fingerprint Impression Blocks (Individual & Simultaneous)

It is very important that care be taken to roll the fingers from nail to nail when taking the individual finger impressions. This will help ensure legibility. Roll the prints in the correct sequence (note the right and left hand designations in the finger blocks) and obtain simultaneous plain "flat" impressions at 45 degree angles that do not extend up into the rolled impressions. Indicate amputated fingers, tip-amputated, transplanted toes/fingers, missing at birth, deformed, bandaged, scars, etc., in the appropriate finger block(s).

NOTE: FBI APPROVED "RETABS" CAN BE APPLIED TO ALL FINGER BLOCKS ON A FINGERPRINT CARD IF NECESSARY, WITH A LIMIT OF TWO (2) "RETABS" PER BLOCK.

15. Juvenile Fingerprint Block

If the subject is charged as an adult, this should be indicated by checking both boxes. Juvenile fingerprint cards will be accepted and retained provided the card contains criterion charges and there is no indication that the card should be returned to your agency.

16. Date of Arrest (DOA) Block

Enter the date the subject was arrested in month, day, and year format (i.e., MM/DD/YYYY). If the contributor is a prison/jail, enter the date received.

17. *Originating Agency Identifier (ORI) Block

If the ORI number is not preprinted by the FBI, enter your ORI number, agency name, city and state. Each agency has its own unique ORI number. If you do not have an ORI number, you can contact your National Crime Information Center (NCIC) Control Terminal Officer (CTO), and an ORI number will be assigned to your agency. Federal agencies should contact their Federal Service Coordinator to obtain an ORI number.

If a **reply** is desired, check the “YES” block. A reply will be sent only if the “YES” block is checked.

To order fingerprint cards and other related forms or for questions concerning your supply order, contact the FBI at (304) 625-3983. Orders using **Form 1-178** (See page 43) may be sent by facsimile to (304) 625-3984 or by mailing to:

**Federal Bureau of Investigation
CJIS Division
Attn: Logistical Support Unit
1000 Custer Hollow Road
Clarksburg, WV 26306**

**IMPORTANT: YOU SHOULD NEVER BORROW PREPRINTED FINGERPRINT CARDS
FROM OTHER AGENCIES OR LOAN YOUR PREPRINTED
FINGERPRINT CARDS TO OTHER AGENCIES.**

18. Send Copy to (SCT) Block

Indicate the ORI number(s) of additional agencies to whom you want copies of the response sent. Do not enter your agency’s ORI number in this block.

19. Date of Offense (DOO) Block

Enter the date the offense was committed in month, day, and year format (i.e., MM/DD/YYYY). Leave blank if the date of offense is unknown.

20. Place of Birth (POB) Block (State or country)

List the state, territorial possession, province (Canadian), or country of birth. Use the correct abbreviation for foreign countries or correctly spell the name of the country. A list of approved abbreviations can be found in the *NCIC Code Manual*. **Do not list a county as a POB.**

21. Country of Citizenship (CTZ) Block

Enter "U.S." if the subject is a citizen of the United States; otherwise, enter the appropriate country. Use the correct abbreviation for foreign countries or correctly spell the name of the country. A list of approved abbreviations can be found in the *NCIC Code Manual*. "Yes" or "NO" responses are not acceptable.

22. Miscellaneous Number (MNU) Block

The MNU is an identifying number associated with the subject such as a U.S. Military Service Number, passport number, etc. Enter the MNU and indicate its description according to the following chart:

<u>DESCRIPTION</u>
Air Force Serial Number
Alien Registration Number
Army Serial Number/National Guard Serial Number/Air National Guard Serial Number (regardless of State).
Bureau Fugitive Index Number
Canadian Social Insurance Number
U. S. Coast Guard Serial Number
Mariner's Document or Identification Number
Marine Corps Serial Number
Royal Canadian Mounted Police Identification Number (FPS Number)
National Agency Case Number-Military
Navy Serial Number
Identification Order Number
Passport Number
Port Security Card Number
Selective Service Number
Veterans Administration Claim Number

23. Scars, Marks, Tattoos, (SMT) and Amputations Block

List any scars, marks, tattoos, discolorations, moles, missing or artificial body parts, deformities, piercings, needle marks, transplanted toes/fingers, and/or amputations. Finger, hand, and arm amputations should also be noted in appropriate finger block(s) on front side of card.

24. Residence/Complete Address (ADR) Block

Enter complete residential address and zip code obtained from the subject's identification.

25. Official Taking Fingerprints Block

Enter the name or number of the official taking fingerprints.

26. Local Identification/Reference (LIR) Number Block

Enter your agency's identification or case number for the subject. The identification number must not exceed twenty (20) characters.

27. Photo and Palm Prints Block

Check "YES" to indicate if a photo and/or palm prints are available. If unavailable, leave this block blank.

28. Employer Block

If the subject's employer is the U.S. Government, indicate a specific agency. If the subject's employer is the military, list the branch of service and serial number. Otherwise, indicate the company or agency where the subject is employed.

29. Occupation Block

Indicate occupation, if available.

30. *Charge/Citation Block

Express the charge(s) in literal terms (e.g., murder, rape, robbery, assault, etc.) Please note that numeric four digit NCIC Codes **cannot** be used alone. Each charge block entry can be up to 300 characters. While abbreviations should not routinely be used, only easily understood abbreviations should be submitted when charge information needs to be shortened.

If only state or local citation numbers are shown without literals, the card will be rejected without being processed. If federal citation numbers are shown, there must be at least one literal or the card will be rejected without being processed. Place one charge in each space provided. If there are more than three charges, continue numbering and place additional charge(s) in the "Additional Information/Basis for Caution," block 34.

EXCEPTION: If a subject is arrested on multiple charges and there is one final disposition that pertains to all charges, each charge may be listed in the same block with the disposition in the corresponding block across from it.

31. Disposition Block

If available, enter the final dispositional data including the sentence date for each corresponding charge. Indicate the type of sentence imposed if applicable (e.g., consecutive, concurrent, probation, etc.) Number each disposition to correspond with the appropriate charge. If the subject was convicted or plead guilty to a lesser charge, include the modification with the disposition. **If a single final disposition applies to all charges listed, please indicate.** If the final disposition is not available at time of fingerprinting, submit an update on Form R-84. If more space is needed, continue numbering and place additional dispositional data in the "Additional," block 32, (Dispositions).

32. Additional Block (Charges)

Enter additional charges when there are more than three and number each one. If more space is needed, continue numbering and place additional charge(s) in the "Additional Information/Basis for Caution," block 34.

33. Additional Block (Dispositions)

If available, enter final dispositional data for each corresponding charge when there are more than three and number each one. If more space is needed, continue numbering and place additional dispositional data in the "State Bureau Stamp," block 35.

34. Additional Information/Basis for Caution Block

Enter additional or multi-informational data that did not fit in the blocks provided (e.g., Additional DOB: 04/25/1950 or Additional SOC: 242-84-0662.) In addition, this block also provides reason for caution. Information which indicates a condition that could be expected to continue when dealing with the subject (e.g., escape risk, armed and dangerous, martial arts, etc.) should be entered.

35. State Bureau Stamp Block

When a card is from a single source state participant, and the card does not reflect your state bureau identification stamp, **the card will be immediately returned to the state bureau/submitting agency.** Check with your state repository to determine if you are a single source state.

NOTE:

AT THIS POINT, A QUALITY REVIEW OF ARREST AND PERSONAL DESCRIPTOR DATA IS EXTREMELY IMPORTANT. THIS STEP CAN IMPROVE THE QUALITY OF THE SUBMISSION AND HELP ELIMINATE IMMEDIATE REJECTS (CARDS RETURNED BY THE FBI WITHOUT PROCESSING).

Figure 1

CRIMINAL FINGERPRINT CARD

Form FD-249
(FRONT SIDE)

LEAVE BLANK		CRIMINAL		(STAPLE HERE)				LEAVE BLANK			
For FBI Use		STATE USAGE		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				For FBI Use			
STATE USAGE		SUBMISSION		APPROXIMATE CLASS		AMPUTATION		SCAR			
For State Bureau Use		LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX 1 *									
SIGNATURE OF PERSON FINGERPRINTED 2				SOCIAL SECURITY NO. 3		LEAVE BLANK					
ALIASES/MAIDEN LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX 4				For FBI Use							
FBI NO. 5	STATE IDENTIFICATION NO. 6	DATE OF BIRTH MM DD YY 7 *		SEX 8 *	RACE 9	HEIGHT 10	WEIGHT 11	EYES 12	HAIR 13		
1. R. THUMB		2. R. INDEX		3. R. MIDDLE		4. R. RING		5. R. LITTLE			
6. L. THUMB		7. L. INDEX		8. L. MIDDLE		9. L. RING		10. L. LITTLE			
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY				14 *		L. THUMB		R. THUMB		RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY	

NOTE: (*) Indicates a required field

Figure 2

CRIMINAL FINGERPRINT CARD

Form FD-249
(BACK SIDE)

FEDERAL BUREAU OF INVESTIGATION, UNITED STATES DEPARTMENT OF JUSTICE CRIMINAL JUSTICE INFORMATION SERVICES DIVISION, CLARKSBURG, WV 26306			
<small>PRIVACY ACT OF 1974 (P.L. 93-579) REQUIRES THAT FEDERAL, STATE, OR LOCAL AGENCIES INFORM INDIVIDUALS WHOSE SOCIAL SECURITY NUMBER IS REQUESTED WHETHER SUCH DISCLOSURE IS MANDATORY OR VOLUNTARY, BASIS OF AUTHORITY FOR SUCH SOLICITATION, AND USES WHICH WILL BE MADE OF IT.</small>			
JUVENILE FINGERPRINT SUBMISSION 15 YES <input type="checkbox"/> TREAT AS ADULT YES <input type="checkbox"/>		DATE OF ARREST MM DD YY 16	ORI CONTRIBUTOR ADDRESS 17 * REPLY DESIRED? YES <input type="checkbox"/>
SEND COPY TO: (ENTER ORI) 18	DATE OF OFFENSE MM DD YY 19	PLACE OF BIRTH (STATE OR COUNTRY) 20	COUNTRY OF CITIZENSHIP 21
MISCELLANEOUS NUMBERS 22	SCARS, MARKS, TATTOOS, AND AMPUTATIONS 23		
	RESIDENCE/COMPLETE ADDRESS 24	CITY	STATE
OFFICIAL TAKING FINGERPRINTS (NAME OR NUMBER) 25	LOCAL IDENTIFICATION/REFERENCE 26	PHOTO AVAILABLE? YES <input type="checkbox"/> PALM PRINTS TAKEN? 27 YES <input type="checkbox"/>	
EMPLOYER: IF U.S. GOVERNMENT, INDICATE SPECIFIC AGENCY. IF MILITARY, LIST BRANCH OF SERVICE AND SERIAL NO. 28		OCCUPATION 29	
CHARGE/CITATION 1. 30 * 2. 3.		DISPOSITION 1. 31 2. 3.	
ADDITIONAL 32		ADDITIONAL 33	
ADDITIONAL INFORMATION/BASIS FOR CAUTION 34		STATE BUREAU STAMP 35	

NOTE: (*) Indicates a required field

REQUIRED FIELDS - CIVIL FINGERPRINT CARDS

Name (NAM)

Originating Agency Identifier (ORI) Number

Date of Birth (DOB)

Sex (SEX)

Fingerprint Impressions

Reason Fingerprinted

If any of the Required Fields are left blank, the card is rejected without further processing unless there is a quoted FBI Number.

Every effort should be made to enter the appropriate data in all of the fields (blocks) as shown on the fingerprint card. The more data entered, the better the check.

All data entered on fingerprint cards must be typewritten or legibly printed utilizing black or blue ink and must not exceed the boundaries of the designated field (block).

DATA ENTERED ON CIVIL FINGERPRINT CARDS

See figures 3 on pages 19 and 20 for an example of a Civil Fingerprint Card (FD-258)

Data fields preceded by an asterisk (*) must be completed in order for a fingerprint card to be processed by the FBI. However, all data fields are important and should be completed if the information is known. Also, the *National Crime Information Center (NCIC) Code Manual* can be used as a reference for codes of various fields.

1. *Name (NAM) Block

Enter the name obtained from the subject in this field. Abbreviations are **not** to be used for any part of the name. This format is last name followed by a comma (,) first and middle name, if any. Suffixes denoting seniority (Jr., Sr., III, etc.) should follow the middle or first name. **Do not obstruct this area by using stamps, labels, holes or staples where the name has been printed.**

2. Signature and Residence of Person Fingerprinted Blocks

Obtain signature of the person being fingerprinted, in ink.

3. Aliases (AKA) Block

List other names used by the subject that are different than the name entered in the "NAM," block 1. Also list the signature name as an AKA if different than the name that appears in the "NAM" block. Maiden names and all previous married names of females should be entered in the AKA field, if known.

4. *Originating Agency Identifier (ORI) Block

If the ORI number is not preprinted by the FBI, enter your ORI number, agency name, city, and state. Each agency is assigned its own unique ORI number. If you do not have an ORI number, you can contact your NCIC Control Terminal Officer (CTO), and an ORI number will be assigned to your agency. Federal agencies should contact their Federal Service Coordinator to obtain an ORI number.

To order fingerprint cards and other related forms or for questions concerning your supply order, contact the FBI at (304) 625-3983. Orders using **Form 1-178** (See page 43) may be sent by facsimile to (304) 625-3984 or by mailing to:

**Federal Bureau of Investigation
CJIS Division
Attn: Logistical Support Unit
1000 Custer Hollow Road
Clarksburg, WV 26306**

IMPORTANT: ***YOU SHOULD NEVER BORROW PREPRINTED FINGERPRINT CARDS FROM OTHER AGENCIES OR LOAN YOUR PREPRINTED FINGERPRINT CARDS TO OTHER AGENCIES.***

5. *Date of Birth (DOB) Block

Enter the DOB in month, day and year format (i.e., MM/DD/YYYY). If a complete DOB is not known, enter the subject's approximate age followed by the statement "YEARS OF AGE". **Fingerprint cards of persons 99 years old or older are not processed by the FBI; they will be rejected immediately.**

NOTE: **IF THE DOB BLOCK IS BLANK, AND THE CARD DOES NOT HAVE AN FBI NUMBER QUOTED, THE CARD WILL BE RETURNED TO THE STATE BUREAU/SUBMITTING AGENCY WITHOUT BEING PROCESSED.**

6. Citizenship (CTZ) Block

Enter "U.S." if the subject is a citizen of the United States; otherwise, enter the appropriate country. Use the correct abbreviation for foreign countries or correctly spell the name of the country. A list of approved abbreviations can be found in the *NCIC Code Manual*. "Yes" or "NO" responses are not acceptable.

7. *Sex (SEX) Block

Sex must be indicated by either "F" (female) or "M" (male).

NOTE: **IN THE ALIAS BLOCK, INDICATE IF THE SUBJECT IS A TRANSVESTITE (CROSS-DRESSER) OR HAS HAD A SEX CHANGE OPERATION. ALSO LIST ANY OPPOSITE-SEX NAMES USED.**

8. Race (RAC) Block

Race must be indicated by one of the following one-character alphabetic characters: **A = Asian, B = Black, I = American Indian, U = Unknown, and W = White**

NOTE: **ADDITIONAL EXPLANATIONS OF RACE CODES ARE LISTED ON PAGE 15:**

- A - A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands.**
- B - A person having origins in any of the black racial groups of Africa.**
- I - A person having origins in any of the original peoples of the Americas and maintaining cultural identification through tribal affiliations or community recognition.**
- U - Of indeterminable race.**
- W - A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.**

9. Height (HGT) Block (3 characters)

Height must be expressed in feet and inches. Fractions of an inch should be rounded off to the nearest inch. Inches less than ten should be preceded by a zero. For example, five feet four inches should be submitted as "504", and six feet even would be "600".

10. Weight (WGT) Block (3 characters)

Weight must be expressed in pounds. Fractions of a pound should be rounded off to the nearest pound.

11. Eye (EYE) Color Block (3 characters)

Indicate eye color by entering one of the following three-character codes:

<u>If Description is:</u>	<u>List Data in Block as:</u>
Black	BLK
Blue	BLU
Brown	BRO
Gray	GRY
Green	GRN
Hazel	HAZ
Maroon	MAR
Multicolored	MUL
Pink	PNK
Unknown	XXX

12. Hair (HAI) Color Block (3 characters)

Indicate hair color by entering one of the following three-character codes:

<u>If Description is:</u>	<u>List Data in Block as:</u>
Bald	BAL
Black	BLK
Blonde (or strawberry)	BLN
Blue	BLU
Brown	BRO
Green	GRN
Gray (or partially gray)	GRY
Orange	ONG
Purple	PLE
Pink	PNK
Red (or auburn)	RED
Sandy	SDY
White	WHI
Unknown	XXX

13. Place of Birth (POB) Block (State or Country)

List the subject's state, territorial possession, province (Canadian), or country of birth. Use the correct abbreviation for foreign countries or correctly spell the name of the country. A list of approved abbreviations can be found in the *NCIC Code Manual*. **Do not list the county as a POB.**

14. Originating Case Agency Number (OCA) Block

Enter your agency's identification or case number for the subject. The OCA must not exceed twenty (20) alphanumeric characters.

15. FBI Number (FBI) Block

Enter the assigned FBI number for the subject, if known.

16. Armed Forces Number (MNU) Block

Enter armed forces number, if known.

17. Social Security Number (SOC) Block

List the subject's Social Security number, if known

18. Miscellaneous Number (MNU) Block

The MNU is an identifying number associated with the subject such as U.S. Military Service Number, passport number, etc. Enter the MNU and indicate the description according to the following chart:

<u>DESCRIPTION</u>
Air Force Serial Number
Alien Registration Number
Army Serial Number/National Guard Serial Number/Air National Guard Serial Number (regardless of State).
Bureau Fugitive Index Number
Canadian Social Insurance Number
U. S. Coast Guard Serial Number
Mariner's Document or Identification Number
Marine Corps Serial Number
Royal Canadian Mounted Police Identification Number (FPS Number)
National Agency Case Number-Military
Navy Serial Number
Identification Order Number
Passport Number
Port Security Card Number
Selective Service Number
Veterans Administration Claim Number

19. Date Fingerprinted Block

Enter the date the subject was fingerprinted in month, day, and year format (i.e., MM/DD/YYYY).

20. Signature of Official Taking Fingerprints Block

Enter the signature or name of the official taking fingerprints. Also list the official's ID number if applicable.

21. Employer and Address Block

State the subject's potential employer and address of that employer.

22. *Reason Fingerprinted Block

Miscellaneous Applicant fingerprint cards are submitted for law enforcement/criminal justice background checks. Clearly state the position and/or agency as applicable such as: Law Enforcement Officer, Corrections Officer, NCIC Terminal Operator, etc.

Applicant User Fee fingerprint cards are submitted when a person is applying for a non-law enforcement position and needs a background check completed as part of the hiring/licensing process (e.g., teacher, day care provider, school bus driver, racing commission, liquor license, etc.) Non-Federal Applicant User Fee fingerprint card submissions are governed by state statutes. A state statute must be included in the Reason Fingerprinted block and coincide with the literal (e.g., Pharmacists B&PC 4345, Notaries Public Gov C 8214.1, AS 13.08.015 Permit for School Bus Driver).

23. *Fingerprint Impression Blocks (Individual & Simultaneous)

It is very important that care be taken to roll the fingers from nail to nail when taking the individual's finger impressions. This will help ensure legibility. Roll the prints in the correct sequence (note the right and left hand designations in the finger blocks) and obtain simultaneous plain "flat" impressions at 45 degree angles that do not extend into the rolled impressions. Indicate amputated fingers, tip-amputated, transplanted toes/fingers, missing at birth, deformed, bandaged, scars, etc., in the appropriate finger block(s).

NOTE: FBI APPROVED "RETABS" CAN BE APPLIED TO ALL FINGER BLOCKS ON A FINGERPRINT CARD IF NECESSARY, WITH A LIMIT OF TWO (2) "RETABS" PER BLOCK.

CAUTION: Single Source State

If the card does not reflect your state bureau identification stamp when required, it will be returned immediately to the state bureau/submitting agency. Check with your state repository to determine if you are a single source state.

NOTE: AT THIS POINT, A QUALITY REVIEW OF REASON FINGERPRINTED AND PERSONAL DESCRIPTOR DATA IS EXTREMELY IMPORTANT. THIS STEP CAN IMPROVE THE QUALITY OF THE SUBMISSION AND HELP ELIMINATE IMMEDIATE REJECTS (CARDS RETURNED BY THE FBI WITHOUT ANY PROCESSING).

Figure 3

CIVIL FINGERPRINT CARD

Form FD-258
(FRONT SIDE)

APPLICANT		LEAVE BLANK For FBI Use		TYPE OR PRINT ALL INFORMATION IN BLACK LAST NAME <u>NAM</u> FIRST NAME _____ MIDDLE NAME _____ 1 *						DATE OF BIRTH <u>DOB</u> Month <u>5 *</u> Day _____ Year _____ For FBI Use	
SIGNATURE OF PERSON FINGERPRINTED 2		ALIASES <u>AKA</u> 3		O R I 4 *							
RESIDENCE OF PERSON FINGERPRINTED 2		CITIZENSHIP <u>CTZ</u> 6		SEX <u>7 *</u>	RACE <u>8</u>	HGT <u>9</u>	WGHT <u>10</u>	EYES <u>11</u>	HAIR <u>12</u>	PLACE OF BIRTH <u>POB</u> 13	
DATE 19	SIGNATURE OF OFFICIAL TAKING FINGERPRINTS 20		YOUR NO. <u>OCA</u> 14		LEAVE BLANK						
EMPLOYER AND ADDRESS 21		FBI NO. <u>FBI</u> 15		ARMED FORCES NO. <u>MNU</u> 16		CLASS _____		REF _____ For FBI Use			
REASON FINGERPRINTED 22 *		SOCIAL SECURITY NO. <u>SOC</u> 17		MISCELLANEOUS NO. <u>MNU</u> 18							
1. R. THUMB		2. R. INDEX		3. R. MIDDLE		4. R. RING		5. R. LITTLE			
6. L. THUMB		7. L. INDEX		8. L. MIDDLE		9. L. RING		10. L. LITTLE			
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY				L. THUMB	R. THUMB	RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY					
23 *											

NOTE: (*) Indicates a required field

Figure 3

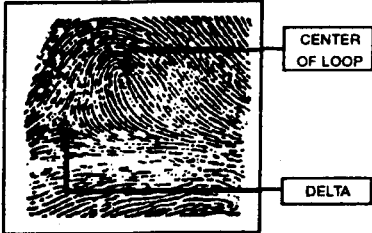
CIVIL FINGERPRINT CARD

Form FD-258
(BACK SIDE)

**FEDERAL BUREAU OF INVESTIGATION
UNITED STATES DEPARTMENT OF JUSTICE
CJIS DIVISION/CLARKSBURG, WV 26306**

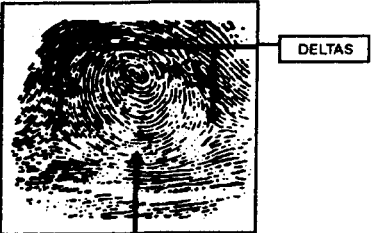
APPLICANT

1. LOOP




THE LINES BETWEEN CENTER OF LOOP AND DELTA MUST SHOW

2. WHORL



THESE LINES RUNNING BETWEEN DELTAS MUST BE CLEAR

3. ARCH



ARCHES HAVE NO DELTAS

TO OBTAIN CLASSIFIABLE FINGERPRINTS.

1. USE BLACK PRINTER'S INK.
2. DISTRIBUTE INK EVENLY ON INKING SLAB.
3. WASH AND DRY FINGERS THOROUGHLY.
4. ROLL FINGERS FROM NAIL TO NAIL, AND AVOID ALLOWING FINGERS TO SLIP.
5. BE SURE IMPRESSIONS ARE RECORDED IN CORRECT ORDER.
6. NOTATE IN THE APPROPRIATE FINGER BLOCKS IF APPLICANT IS MISSING ONE OR MORE FINGERS FOR ANY REASON. IF NOT MISSING, ALL TEN IMPRESSIONS MUST BE PROVIDED WITH SCARS AND DEFORMITIES NOTATED.
7. IF SOME PHYSICAL CONDITION MAKES IT IMPOSSIBLE TO OBTAIN PERFECT IMPRESSIONS, SUBMIT THE BEST THAT CAN BE OBTAINED.
8. EXAMINE THE COMPLETED PRINTS TO SEE IF THEY CAN BE CLASSIFIED, BEARING IN MIND THAT MOST FINGERPRINTS FALL INTO THE PATTERNS SHOWN ON THIS CARD (OTHER PATTERNS OCCUR INFREQUENTLY AND ARE NOT SHOWN HERE).

THIS CARD FOR USE BY:

1. LAW ENFORCEMENT AGENCIES IN FINGERPRINTING APPLICANTS FOR LAW ENFORCEMENT POSITIONS*
2. OFFICIALS OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT, LICENSING, AND PERMITS, AS AUTHORIZED BY STATE STATUTES AND APPROVED BY THE ATTORNEY GENERAL OF THE UNITED STATES LOCAL AND COUNTY ORDINANCES, UNLESS SPECIFICALLY BASED ON APPLICABLE STATE STATUTES DO NOT SATISFY THIS REQUIREMENT.
3. U.S. GOVERNMENT AGENCIES AND OTHER ENTITIES REQUIRED BY FEDERAL LAW.**
4. OFFICIALS OF FEDERALLY CHARTERED OR INSURED BANKING INSTITUTIONS TO PROMOTE OR MAINTAIN THE SECURITY OF THOSE INSTITUTIONS.

INSTRUCTIONS:

1. PRINTS MUST FIRST BE CHECKED THROUGH THE APPROPRIATE STATE IDENTIFICATION BUREAU, AND ONLY THOSE FINGERPRINTS FOR WHICH NO DISQUALIFYING RECORD HAS BEEN FOUND LOCALLY SHOULD BE SUBMITTED FOR FBI SEARCH.
2. PRIVACY ACT OF 1974 (PL. 93-579) REQUIRES THAT FEDERAL STATE, OR LOCAL AGENCIES INFORM INDIVIDUALS WHOSE SOCIAL SECURITY NUMBER IS REQUESTED WHETHER SUCH DISCLOSURE IS MANDATORY OR VOLUNTARY, BASIS OF AUTHORITY FOR SUCH SOLICITATION AND USES WHICH WILL BE MADE OF IT.
3. IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN IN SPACE "EMPLOYER AND ADDRESS". THE CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI.
4. FBI NUMBER, IF KNOWN, SHOULD ALWAYS BE FURNISHED IN THE APPROPRIATE SPACE.

MISCELLANEOUS NO. : RECORD: OTHER ARMED FORCES NO:
PASSPORT NO. (FP), ALIEN REGISTRATION NO. (AR), PORT SECURITY CARD NO. (PS), SELECTIVE SERVICE NO. (SS) VETERANS' ADMINISTRATION CLAIM NO. (VA).

LEAVE THIS SPACE BLANK

FD-258 (REV. 6-11-69)

DATA ENTERED ON PALM PRINT CARDS

See Figures 4 and 5 on pages 24 and 25 for an example of a Palm Print Card (FD-884)

* This information is provided by the Latent Fingerprint Section at FBI Headquarters.

NOTE: The palm print card is a supplement to the criminal or civil fingerprint card. Palm print cards are not intended to stand alone from the actual fingerprint card. The purpose of the palm print card stock to state and local agencies is to encourage the recording of palm prints in support of solving more crimes through latent print identification, and to provide a standard format as the basis for developing automated palm print systems. These records should be maintained at the local level.

Data fields preceded by an asterisk (*) must be completed.

Separate cards are required for each hand

1. Local Agency Identification/Reference (LIR) Number Block

Enter your agency's identification or case number for the subject. The identification number must not exceed twenty (20) characters.

2. *Name (NAM) Block

Enter the name obtained from the subject in this field. Abbreviations are **not** to be used for any part of the name. The format is last name followed by a comma (,) first and middle name, if any. Suffixes denoting seniority (Jr., Sr., III, etc.) should follow the middle or first name. **Do not obstruct this area by using stamps, labels, holes, or staples where name has been printed.**

3. State Identification Number (SID) Block

Enter the SID when known. Enter SID numbers with no more than ten (10) alphanumeric characters, which includes the state abbreviation (e.g., NY12345678). If labels are used for SID numbers, ensure that the label used is an appropriate size for the SID block. **When the SID number is missing from a National Fingerprint File (NFF) participant, the card will be rejected.**

4. FBI Number (FBI) Block

Enter the assigned FBI number for subject, if known.

5. *Date Printed Block

Enter date the subject was fingerprinted in month, day, and year format (i.e., MM/DD/YYYY).

6. *Signature of Official Taking Fingerprints

Enter the signature or name of the official taking fingerprints. Also list the official's ID number if applicable.

7. *Contributor/Originating Agency Identifier (ORI) Block

Enter your ORI number. Each agency is assigned its own unique ORI number. If you do not have an ORI number, you can contact your NCIC Control Terminal Officer, and an ORI number will be assigned to your agency. Federal agencies should contact their Federal Service Coordinator to obtain an ORI number.

To order palm print cards Form (FD-884) and other related forms or for questions concerning your supply order, contact the FBI at (304) 625-3983. Orders using Form 1-178 (See page 43) may be sent by Facsimile to (304) 625-3984 or by mailing to:

**Federal Bureau of Investigation
CJIS Division
Attn: Logistical Support Unit
1000 Custer Hollow Road
Clarksburg, WV 26306**

8. *Area for Recording Side of Palm Block

This area is designated for recording the subject's right or left writer's palm (side) impression.

***NOTE:* SEPARATE CARDS ARE REQUIRED FOR EACH HAND.
STATE WHICH HAND IS PRINTED.**

9. *Area for Recording Index Finger Block

This area is designated for recording the subject's right or left index finger if present. State which finger is printed (right or left).

10. *Area for Recording Palm Print Block

This area is designated for recording the subject's right or left palm print. The hand symbols depict the direction the palm prints should be recorded on the card.

11. Area for Recording Rolled Finger Impressions Blocks

It is very important that care be taken to roll the fingers from nail to nail when taking the individual's finger impressions. This will help ensure legibility. Roll the prints in the correct sequence. Indicate amputated fingers or fingers missing at birth, transplanted toes/fingers, deformed, bandaged, scars, etc., in the appropriate finger block(s).

12. Area for Additional Fingerprint/Palm Print Impressions

This area is an allows the recording of additional fingerprint and/or palm print impressions.

Figure 4

PALM PRINT CARD

Form FD-884
(FRONT SIDE)

IDENTIFICATION NO. 1	LAST NAME 2 *	FIRST NAME	MIDDLE NAME	SSN NUMBER 3	FBI NUMBER 4
DATE PRINTED 5 *	SIGNATURE OF OFFICIAL TAKING PRINTS 6 *	ID NUMBER	CONTRIBUTOR (ORI) 7 *		
WRITER'S PALM IMPRESSION 8 *				INDEX FINGER 9 *	
10 *					

(Hand icons on the left and right sides of the impression area)

NOTE: (*) Indicates a required field

Figure 5

PALM PRINT CARD

Form FD-884
(BACK SIDE)

FD-884 (10-20-88)

FEDERAL BUREAU OF INVESTIGATION, UNITED STATES DEPARTMENT OF JUSTICE
1000 CUSTER HOLLOW ROAD, CLARKSBURG, WEST VIRGINIA 26306

12

THUMB	INDEX	MIDDLE	RING	LITTLE
		11		

REQUIRED FIELDS - FINAL DISPOSITION REPORT (R-84)

Name

Date of Birth

Contributor of Fingerprints

Date Arrested or Received

Offenses Charged at Arrest

Final Disposition including amended charges

Submitting Agency

If any of the Required Fields are left blank, the form is rejected without further processing.

Every effort should be made to enter the appropriate data in all of the fields (blocks) as shown on Form R-84. Submitting complete information in all fields will eliminate delays and result in timely updates to Criminal History Records.

NOTE: All data entered on Final Disposition Reports must be typewritten or legibly printed utilizing black or blue ink.

DATA SUBMITTED ON FINAL DISPOSITION REPORT

See Figures 6 and 7 pages 30 and 31 for an example of a Final Disposition Report (R-84)

Data Fields preceded by an asterisk (*) must be completed in order for a Final Disposition Report to be processed by the FBI. However, all data fields are important and should be completed if the information is known.

1. FBI Number

Enter the assigned FBI number for the subject, if known.

2. *Name Block

Enter the subject's name submitted on the fingerprint card at the time of the arrest. Abbreviations are **not** to be used for any part of the name. The format is last name followed by a comma (,) first and middle name, if any. Suffixes denoting seniority (Jr., Sr., III, etc.) should follow the middle or first name.

3. *Date of Birth

Enter DOB in month, day and year format; i.e. (MM/DD/YYYY). If a complete DOB is not known, enter the approximate age of the subject's followed by the statement "YEARS OF AGE". **Final Disposition Reports of persons 99 years old or older are not processed by the FBI; they will be rejected immediately.**

4. Sex

The subject's sex must be indicated by either "F" (female) or "M" (male).

NOTE: INDICATE IF THE SUBJECT IS A TRANSVESTITE (CROSS-DRESSER), HAS HAD A SEX CHANGE OPERATION AND/OR LIST ANY OPPOSITE-SEX NAMES USED ON THE BACK OF THE FORM.

5. State Bureau Number (SID)

Enter the State Identification Number (SID) when known. Enter SID numbers with no more than ten (10) alphanumeric characters, which includes the state abbreviation (e.g., NY12345678).

6. Social Security Number (SOC)

List the subject's Social Security number, if known. Additional Social Security numbers used by the subject may be entered on the back of the form.

7. *Contributor of Fingerprints

Enter the name and location of the agency that submitted the original arrest fingerprint card.

8. Arrest Number (OCA)

Enter the arresting agency's Local Identification Number (OCA) or case number for the subject. The OCA must not exceed twenty (20) alphanumeric characters.

9. *Date Arrested or Received

Enter the date the subject was arrested by the submitter of the original arrest fingerprint card in month, day, and year format (i.e. MM/DD/YYYY).

10. *Offenses Charged at Arrest

Express the original arrest charge(s) in literal terms; e.g. (murder, rape, robbery, assault, etc.) Numeric four digit NCIC Codes & U.S. Title Codes **cannot** be used alone, but may be included with the literal charge.

If citation numbers are listed without literals, the form will be rejected without being processed. If more room is needed, additional charges may be entered in the blank area on the back of the form. **Number each charge to correspond with the disposition information.**

11. *Final Disposition & Date

Enter all final dispositional information, including the sentence date for each charge. Indicate the type of sentence imposed if applicable (e.g., consecutive, concurrent, probation, etc.) Number each disposition to correspond with the appropriate charge. If the subject was convicted or plead guilty to a lesser charge, include the modification with the disposition. **If a single final disposition applies to all charges listed, please indicate that;** e.g. (5 yrs. prison on charges of burglary and theft). If additional room is needed, use the blank area on the back of the form.

12. *This Form Submitted By:

Enter the ORI Number, agency, city, and state of the **submitter**.
On appropriate lines, provide signature, date, and title.

13. Court Ordered Expungement:

If a certified or authenticated copy of a court ordered expungement is submitted, place a check mark in the box to the left of "COURT ORDERED EXPUNGEMENT". Staple the court order to the Final Disposition Report in the upper left hand corner on the report.

To order Final Disposition Reports (R-84) and other related forms or for questions concerning your supply order, contact the FBI at (304) 625-3983. Orders using **Form 1-178** (See page 43) may be sent by facsimile to (304) 625-3984 or by mailing to:

**Federal Bureau of Investigation
CJIS Division
Attn: Logistical Support Unit
1000 Custer Hollow Road
Clarksburg, WV 26306**

Figure 6

FINAL DISPOSITION REPORT

Form R-84
(FRONT SIDE)

R-84 (Rev. 08-31-1999)		FINAL DISPOSITION REPORT		Leave Blank
Note: This vital report must be prepared on each individual whose arrest fingerprints have been forwarded to the FBI Criminal Justice Information Services Division without final disposition noted thereon. If no final disposition is available to arresting agency, complete left side and forward the form when case referred to prosecutor and/or courts. Agency on notice as to final disposition should complete this form and submit to: FBI, C.JIS Division, Clarksburg, WV 26306. (See instructions on reverse side)				
FBI No. <u>1</u>		Final Disposition & Date (If convicted or subject pleaded guilty to lesser charge, include this modification with disposition.)		
Name on fingerprint Card Submitted to FBI Last First Middle <u>2 *</u>		<u>11 *</u>		
Date of Birth <u>3 *</u> Sex <u>4</u>		This Form Submitted By: (Name, Title, Agency, ORI No., City & State)		
Henry Fingerprint Classification From FBI 1-B Response State Bureau No. (SID) <u>5</u> Social Security No. (SOC) <u>6</u>				
Contributor of Fingerprints (Include complete name and location of agency together with ORI number.) <u>7 *</u>		<u>12 *</u>		
Arrest No. (OCA) <u>8</u>		Date Arrested or Received <u>9 *</u>		<input type="checkbox"/> COURT ORDERED EXPUNGEMENT: <u>13</u> Certified or Authenticated Copy of Court Order Attached.
Offenses Charged at Arrest <u>10 *</u>				
NOTE: IF ADDITIONAL SPACE IS NEEDED, CONTINUE ON THE REVERSE SIDE OF THIS FORM.				

NOTE: (*) Indicates a required field

Figure 7

FINAL DISPOSITION REPORT

Form R-84
(BACK SIDE)

INSTRUCTIONS

1. The purpose of this report is to record the initial data of an individual's arrest and thereafter secure the final disposition of the arrest at the earliest possible time from either the arresting agency, the prosecutor or the court having jurisdiction. (INTERIM DISPOSITION INFORMATION, e.g. RELEASED ON BOND, SHOULD NOT BE SUBMITTED.) The SUBJECT'S NAME, CONTRIBUTOR AND ARREST NUMBER should be exactly the same as they appear on the fingerprint card IN THE FILES OF THE FBI. The FBI number should be indicated, if known. Agency ultimately making final disposition will complete and mail form to: FBI Criminal Justice Information Services Division, Clarksburg, WV 26306.
2. The arresting agency should fill in all arrest data on left side of form. If the arrest is disposed of by the arresting agency, as where the arrestee is released without charge, the arresting agency should fill in this final disposition and mail form to FBI Criminal Justice Information Services Division. Of course, if the final disposition is known when the arrest fingerprint card is submitted it should be noted thereon and this form is then unnecessary. In the event the case goes to the prosecutor, this form should be forwarded to the prosecutor with arrestee's case file.
3. The prosecutor should complete the form to show final disposition at the prosecution level if the matter is not being referred for court action and thereafter submit form directly to FBI Criminal Justice Information Services Division. If court action required, the prosecutor should forward form with case file to court having jurisdiction.
4. The court should complete this form as to final court disposition such as when arrested person is acquitted, case is dismissed, on conviction and when sentence imposed or sentence suspended and person placed on probation.
5. When arrested person convicted or enters guilty to lesser or different offense than charged when originally arrested, this information should be clearly indicated.
6. If subsequent action taken to seal or expunge record, attach certified or authenticated copy of court order to this form.
7. It is vitally important for completion of subject's record in the FBI Criminal Justice Information Services Division files that Final Disposition Report be submitted in every instance where fingerprints previously forwarded without final disposition noted there on.

*U.S. Government Printing Office: 2001— 478-974/49136

REQUIRED FIELDS FLASH/CANCELLATION NOTICE (I-12)

Name
Date of Birth
Flash Block
Final Disposition Block
Charge
Cancel Block **(if applicable)*
FBI Number
Agency to be Notified of Apprehension

If any of the Required Fields are left blank, the form is rejected without further processing.

Every effort should be made to enter the appropriate data in all of the fields (blocks) as shown on the I-12 Form. Submitting complete information in all fields will result in timely updates to Criminal History Records.

* Fill in Cancel Block if I-12 is a Flash Cancellation.

NOTE: All data entered on Flash/Cancellation Notices must be typewritten or legibly printed utilizing black or blue ink.

DATA SUBMITTED ON FLASH/CANCELLATION NOTICE

See Figures 8 and 9 on pages 38 and 39 for an example of a Flash/Cancellation Notice (I-12)

Data Fields preceded by an asterisk (*) must be completed in order for a Flash/Cancellation Notice to be processed by the FBI. However, all data fields are important and should be completed if the information is known.

1. Date

Enter the current date.

2. *Flash Block * This field is not required when submitting a cancellation notice.

Enter the supervision beginning date(s) and ending date(s) in month, day, and year format (i.e., MM/DD/YYYY). The time period entered and the type of supervision must match the information provided in the "Final Disposition," block 4.

3. Date and Place of Sentence Block

Enter the date sentencing took place, in month, day, and year format (i.e., MM/DD/YYYY). Enter the city and state where sentencing took place.

4. *Final Disposition Block

List the period of incarceration, suspended sentence, fines, and period of supervision. The time period entered and the type of supervision must match the information provided in the "Flash," block 2.

5. *Charge Blocks

Express the charge(s) in literal terms (e.g., murder, rape, robbery, assault, etc.) Numeric four digit NCIC Codes & U.S. Title Codes **cannot** be used alone, but may be included with the literal charge.

If citation numbers are shown without literals, the form will be rejected without being processed. If more room is needed, additional charges may be entered in the blank area on the back of the form.

6. Contributor of Fingerprints Block

Enter the name and location of the agency that submitted the original fingerprint card.

7. ***Cancel Block** *Not required when submitting an I-12 to post a Flash.

A prompt notification is requested when the subject's supervision is terminated, set aside, or revoked. The effective date must also be included.

8. ***Name Block**

Enter the most complete name available for the subject. Abbreviations are **not** to be used for any part of the name. The format is last name followed by a comma (,) first and middle name, if any. Suffixes denoting seniority (Jr., Sr., III, etc.) should follow the middle or first name.

9. **Residence Block**

Enter the complete residential address of the subject, if known.

10. **Aliases Block**

List other names used by the subject that are different than the name entered in "NAM," block 8, including the signature name, using the same format (i.e. LAST, FIRST, MIDDLE SUFFIX).

11. **Numbers Blocks**

Arrest - Enter arrest (OCA) or prison number assigned by the arresting/receiving agency, if known.
Military - Enter the subject's military service number if known.
Alien - Enter the assigned Alien Registration number for the subject if known.
Social Security - Enter the subject's Social Security Number, if known, and any additional Social Security Numbers used.

12. **Occupation Block**

List the subject's occupation, if available.

13. **Race Block**

The subject's race must be indicated by one of the following one-character alphabetic characters:

A = Asian, B = Black, I = American Indian, U = Unknown, and W = White

NOTE: ADDITIONAL EXPLANATIONS OF RACE CODES ARE LISTED ON PAGE 35:

- A - A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands.**
- B - A person having origins in any of the black racial groups of Africa.**
- I - A person having origins in any of the original peoples of the Americas and maintaining cultural identification through tribal affiliations or community recognition.**
- U - Of indeterminable race.**
- W - A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.**

14. Sex Block

Sex must be indicated by either "F" (female) or "M" (male).

NOTE: INDICATE IF THE SUBJECT IS A TRANSVESTITE (CROSS-DRESSER), HAS HAD A SEX CHANGE OPERATION AND/OR LIST ANY OPPOSITE-SEX NAMES USED ON THE BACK OF THE FORM.

15. Height Block

Height must be expressed in feet and inches. Fractions of an inch should be rounded off to the nearest inch. Inches less than ten should be preceded by a zero. For example, five feet four inches should be submitted as "504", and six feet even would be "600".

16. Citizenship Block

Enter "U.S." if the subject is a citizen of the United States; otherwise, enter the appropriate country. Use the correct abbreviation for foreign countries or correctly spell the name of the country. A list of approved abbreviations can be found in the NCIC manual. "Yes" or "No" responses are not acceptable.

17. Weight

Weight must be expressed in pounds. Fractions of a pound should be rounded off to the nearest pound.

18. Eye Color Block (3 characters)

Indicate the subject's eye color by entering one of the three-character codes on page 28.

<u>If Description is:</u>	<u>List Data in Block as:</u>
Black	BLK
Blue	BLU
Brown	BRO
Gray	GRY
Green	GRN
Hazel	HAZ
Maroon	MAR
Multicolored	MUL
Pink	PNK
Unknown	XXX

19. Hair Color Block (3 characters)

Indicate the subject's hair color by entering one of the following three-character codes:

<u>If Description is:</u>	<u>List Data in Block as:</u>
Bald	BAL
Black	BLK
Blonde (or strawberry)	BLN
Blue	BLU
Brown	BRO
Green	GRN
Gray (or partially gray)	GRY
Orange	ONG
Purple	PLE
Pink	PNK
Red (or auburn)	RED
Sandy	SDY
White	WHI
Unknown	XXX

20. *FBI Number Block

Enter the assigned FBI number for the subject. **If the FBI number is not entered, the form will be automatically rejected without processing. *Refer to back side of Form I-12, figure 9, page 39, for specific instructions.**

21. *Date of Birth Block

Enter the subject's DOB in month, day and year format; i.e. (MM/DD/YYYY). If a complete DOB is not known, enter approximate age followed by the statement "YEARS OF AGE". **Flash/Cancellation Notices of persons 99 years old or older are not processed by the FBI; they will be rejected immediately.**

22. Place of Birth Block

List the subject's state, territorial possession, province (Canadian), or country of birth. Use the correct abbreviation for foreign countries or correctly spell the name of the country. A list of approved abbreviations can be found in the *NCIC Code Manual*. **Do not list the county as a POB.**

23. Scars, Marks, Tattoos and Amputations Block

List any scars, marks, tattoos, discolorations, moles, missing or artificial body parts, deformities, piercings, needle marks, transplanted toes/fingers, and/or amputations.

24. Agency Case or File Number Block

Enter the number assigned by the supervising agency.

25. Please Furnish Identification Record

To request a copy of the subject's criminal history record at the time the Flash is being posted, place a check mark in the box provided.

26. *Agency, *ORI Number, and Address of Parties to be Notified of subject's Apprehension

List the agency to be notified if the subject incurs any additional criminal arrests during the supervision period.

27. Agency, *ORI Number, and Address of the Contributor

Enter the Originating Agency Identifier (ORI) number, agency, and address of the contributor submitting the form.

To order Flash/Cancellation Notices (I-12) and other related forms or for questions concerning your supply order, contact the FBI at (304) 625-3983. Orders using **Form 1-178** (See page 43) may be sent by facsimile to (304) 625-3984 or by mailing to:

**Federal Bureau of Investigation
CJIS Division
Attn: Logistical Support Unit
1000 Custer Hollow Road
Clarksburg, WV 26306**

Figure 8

FLASH CANCELLATION NOTICE

Form I-12
(FRONT SIDE)

Flash/Cancellation Notice
I-12 (Rev. 9-28-99)

Date 1

To: **FBI, CJIS Division**
Clarksburg, WV 26306

Flash: Mandatory Release _____ Expires _____ Parole _____ Expires _____	(date)	(date)	(date)	(date)
2 * Supervised Release _____ Expires _____ SPT _____ Expires _____				
Probation _____ Expires _____ PTD _____ Expires _____				
When requesting flash notice, give the following information:				
Date and Place of Sentence 3		Final Disposition 4 *		
Charge 5 *				
Contributor of Fingerprints 6				
<input type="checkbox"/> CANCEL (reason) 7 *				
Name 8 *		Residence 9		
Aliases 10	Numbers	Occupation 12		
	Arrest 11			
	Military 11	Race 13	Sex 14	Height 15
				Citizenship 16
FBI#* 20 *	Alien 11	Weight 17	Eyes 18	Hair 19
Date of Birth 21 *	Social Security 11			
Place of Birth 22	Scars, marks and tattoos 23			
Agency Case or File Number 24	25 <input type="checkbox"/> Please Furnish Identification Record			
Agency *ORI#, and Address of Parties to be notified of Apprehension: 26 * (Agency & ORI Number)	Agency, *ORI#, and Address of Contributor 27 * (ORI Number)			

*FBI# and ORI# Must be indicated or form will be returned without being processed.
See over for instructions

NOTE: (*) Indicates a required field

Figure 9

FLASH CANCELLATION NOTICE

Form I-12
(BACK SIDE)

FLASH information should be furnished when subject is being placed on parole, supervisory release, pretrial diversion, probation, etc.

CANCELLATION information should be furnished when you no longer desire information concerning subject for which you have previously requested a flash notice.

Fingerprints for offense must be in the Criminal Justice Information Services Division Criminal File and the FBI number furnished when requesting a **FLASH** notice; however, if FBI number is known but flash offense is not on file, fingerprints for flash offense must be submitted with I-12. If you desire to have a **FLASH NOTICE** posted and are not certain whether an FBI identification record exists for the subject, query the Interstate Identification Index (III) via NCIC. Enter all available descriptive data to retrieve any identification record(s) possibly identical to your subject. If a possibly identical record is located, determine whether or not this record is identical with the subject. If identical, place FBI number on I-12 and submit. If no record is identical to subject, obtain fingerprints and submit with I-12.

If you have questions concerning the use of an Originating Agency Identifier (ORI) number, contact your state NCIC Control Terminal Officer or Federal Service Coordinator.

U.S. GPO: 2000-461-077/31704

Abusive Language	Mandatory Appearance
Alms Solicitation	Material Witness
Amnesia	Medical Treatment
Begging	Mental
Breach of Peace	Minor in Bar
Card Game Playing	Minor in Consumption
Careless or Reckless Driving (as long as driving under influence of drugs or liquor, hit and run, vehicular manslaughter, involuntary manslaughter, or manslaughter <u>NOT</u> involved)	Minor in Gambling House
Civil Commitment	Minor in Possession Alcohol
Criminal Registration	Misrepresenting Age (Liquor)
Curfew Violation	Mooching
Detention Only	Narcotics Registration
Detoxification	Negligent Driving
Dice Game Playing	No Driver's License - (Note: Operating Auto with Altered License Considered as Serious Charge)
Disregarding Traffic Signals	No Inspection Sticker or Expired Sticker
Disturbance	No Visible Means
Disturbing Public Worship	Obstructing Traffic
Disturbing the Peace	Operating Auto Without License
Dog Laws	Panhandling
Drag Racing	Parking Warrants
Driving while License Suspended or Revoked	Patient - (Note: Unless print pertains to MAJOR Charge, e.g., murder, rape, etc.)
Drunk (not traffic charges)	Peace Bond
Drunk in or about Auto	Peace Warrant
Drunk in Public Restroom or Restaurant	Possession of Lottery Tickets, Policy Slips, or Numbers
Drunk on Highway	Possession of Open Bottle or Container
Ex-Con Registration	Probation or Parole Check
Failure to Give Good Account	Profane Language
Failure to Identify	Public Intoxication
Failure to Operate in Prudent Manner (auto)	Public Nuisance
Failure to Register in Hotel or Register in Hotel with Someone Other Than Husband or Wife	Purchasing Liquor as a Minor
Failure to Yield for Emergency Vehicle, Blue Light, or Siren	Rebooked on Suspicion
False Fire Alarm	Runaway
Felony Registration	Safekeeping, Skusm, Sak
Fireworks	Sleeper
Fishing Without a License	Sleeping in a Subway
For Identification Purposes	Speeding
General Principles	State Work Furlough
Going Thru Red Light	Suspect
Hitchhiking	Suspicion (unaccompanied by criterion charge)
Illegal Consumption of Beer	Suspicious Person
Illegal Possession of Beer	Traffic Violations (minor traffic, vehicle and licensing charges)
Inadequate Brakes	Trainriding (hobo)
Inquiry (unaccompanied by criterion charge)	Tramp
Interview	Transient
Intoxication	Truancy
Investigation (unaccompanied by criterion charge)	Trusty Commitment
Investigation Mental	Urinating in Public
Jaywalking	Uninsured Motor Vehicle
Juvenile Charge **	Unlawful Blood Alcohol Content or Count (alone only - NOT with driving charges)
Juvenile Commitment **	Vagabond or Rogue
Juvenile Offender **	Vagrancy
Late Hours	Veneal Control Registration
Loafer	Visiting a Common Nuisance
Lodger	Voluntary Commitment
Loitering	Walking on Highway
Lottery Playing	Wayward
Lunacy (unless print pertains to major charge)	

* This list is not all inclusive - other charges similar in nature may not appear in the list.

** Juvenile Arrests (charges) will be accepted as long as the offense for which the juvenile is charged or detained is clearly stated, e.g., "JUVENILE ARREST - BURGLARY."

Telephone Contacts

***WEST VIRGINIA CJIS COMPLEX SWITCHBOARD**

Phone: 304-625-2000

***IAFIS USER SUPPORT (HELP DESK)** - Centralized problem reporting, tracking, and monitoring.

Phone: 304-625-4357

***SPECIAL PROCESSING CENTER** - Processes criminal expedite fingerprint and special record services requests. Example: a request from law enforcement that requires immediate attention. Operates 24 hours, 7 days a week.

Phone: 304-625-5584; Fax: 304-625-5587

***ANSWER HITS TO WANTS UNIT** - Places/removes wanted person information, parole/probation flags.

Phone: 304-625-4618; Fax: 304-625-4557

***SPECIAL CORRESPONDENCE UNIT** - Handles information regarding congressional matters and requests that originate through the Freedom of Information Act. Example: individuals who request a copy of their record for private use.

Phone: 304-625-3878; Fax: 304-625-3571

***LIAISON UNIT** - Serves local, state, and federal law enforcement agencies and private individuals dealing with matters of a complex nature regarding the acceptance, processing, and dissemination of fingerprint card submissions to the CJIS Division. This unit serves as the point of contact for numerous agencies to resolve specific problems involving excessive processing time for civil applicant fingerprint card submissions and other concerns. The Liaison Unit also provides explanations of FBI policies and procedures to law enforcement agencies and individuals regarding the various services provided by the CJIS Division.

Phone: 304-625-5590; Fax: 304-625-3571

To order fingerprint cards or other related forms (use FORM 1-178 on page 42)

For questions concerning your supply order, contact the FBI at:

FEDERAL BUREAU OF INVESTIGATION
CJIS DIVISION

ATTN: LOGISTICAL SUPPORT UNIT

1000 CUSTER HOLLOW ROAD

CLARKSBURG, WV 26306

Phone: 304-625-3983

Fax: 304-625-3984

IMPORTANT: You should never borrow pre-printed fingerprint cards from other agencies or loan your pre-printed fingerprint cards to other agencies.

CJIS SUPPLY REQUISITION FORM

Use this form for ordering supplies from the Criminal Justice Information Services Division

To: Federal Bureau of Investigation Attention: Logistical Support Unit (LSU), CJIS Division 1000 Custer Hollow Road Clarksburg, WV 26306		Date _____	
Form Number	Description	Quantity without ORI#	Quantity* with ORI#
FD-249	Arrest and Institution Fingerprint Cards (white card with red ink)		
FD-258	Applicant Fingerprint Cards (white card with blue ink)		
FD-353	Personal Identification Fingerprint Cards		
FD-884	Palm Prints (white card with red ink)		
Live Scan Card	Completely Blank (white card)		
R-84	Final Disposition Report Form		
I-12	Flash/Cancellation Notice		
1-433a	Supervision Transfer Notice		
ENVELOPES (8 3/4" X 8 3/4" self -addressed)			
	Manila Envelopes: (Used in mailing Criminal & Federal applicant prints)		
	Blue Envelopes: (Use for mailing "direct billing" prints)		
	Green Envelopes: (Used when payment is enclosed with prints)		
	ABA Envelopes with Packing Slip: (Used only by American Bankers Assoc.)		

*Total number of individual cards, forms, envelopes, etc.

Facsimile Orders may be sent to (304) 625-3984

Service Numbers: Questions concerning your **supply orders** may be directed to **LSU** at (304) 625-3983

For questions regarding the appropriate **selection and use** of materials listed on this form, call (304) 625-2000 and request the **Forms Information Line**.

To speak with someone about available fingerprint **training materials, instructional aids, and/or to order instructional materials**, Call (304) 625-2000, and request the **Fingerprint Training Information Line**.

Please type or print information

ORI Number _____ (must be furnished)

Agency _____ Delivery Hours _____

Agency point of contact & telephone # _____

Complete shipping address (no P.O. Box, if possible) _____

City, State and Zip Code # _____

