IDACS/NCIC ENTRY FORM

| Agency: | | | Case Number: | |
|---------------------------|--------------------|--------------|---------------------------------------|----------------|
| Officer: | | Date: | | _ |
| Type of Entry: Article | Boat G | un Vehicle | License Plate | |
| Date of Theft/Date Missin | ng: | No | tification Required if Recovered: | YES NO |
| | | VEHICLE | | |
| Make: | | | el: | |
| Year: | | | : | |
| | | | r: | |
| | | LIY: | UT: | |
| | | | | |
| IIC: | State: | LICENSE PLAT | re Lit: | |
| | | | | |
| | | | | |
| _ | | ARTICLE | | |
| Type: | | | i: | |
| Serial #/OAN: | | | | |
| | | | | |
| NA-L- | | GUN | -1 | |
| | Model: Caliber: | | | |
| | | | er: barrel, pump-action, flintlock | |
| (semi-auto, bolt action, | | | | , etc.), Tille |
| | | | | |
| | | BOAT | | |
| Registration #: | | | Expiration: | |
| Hull/OAN/Coast Guard | | | | |
| | | | | |
| Additional Information | : | | | |
| | | | | |
| | | | | |
| Victim Signature: | | | | |
| Victim Phone Number: | | | | |
| Victim Fmail Address: | | | _ | |

NO Handwritten Submissions, Fax or Email to Dispatch using SUPERVISOR@CLARKCOUNTY911.COM.