

NCIC Entry/Clearance Form Gun /Article Officer:

Case #		— Gun		Offi	cer:		
ORI#	PRI#			Enter	ed By:		
			choose One				
* = Mandatory Fields			Entry O Clearance O				
Article							
Type *	Brand *		Model		Date	of Theft_*	
Serial # *	·		Owner	Applied Number	r:		
Miscellaneous Inf	ormation:						
G		C	Choose one				
<u>Gun</u>		Stolen	O Lo	ost O			
Serial Number *		Ma	ıke_*		Mod	<u>lel</u>	
<u>Caliber</u> *	Date o	f Theft / Lost *		-	Туре		
Miscellaneous Inf	ormation:						
Securi	ties						
Type *	Serial Number *		D	enomination *		<u>Issuer *</u>	
Social Security #	Owner	*	•	Date of Theft	*	Security Date:	
2770 11							\neg
NIC#						Faxed to Agency	
2nd Party Check:					Date:		-
					Time:		