



IMPERIAL COUNTY SHERIFF'S OFFICE

RAYMOND LOERA
SHERIFF-CORONER-MASHAL



LOCAL CRIMINAL HISTORY REQUEST

Please provide me a list of any and all arrests on file with the Imperial County Sheriff's Office, pursuant to section 13300 through 13326 of the California Penal Code.

(Please print all information)

Date of Request: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Last Name First Name Middle

Date of Birth: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_
MM/DD/YYYY

Driver's License: \_\_\_\_\_ or Social Security Number: \_\_\_\_\_

Alias Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Mail [ ] Pick up [ ] Mail to Alternative address: \_\_\_\_\_

For verification purposes please attach one of the following identifications:

Department of Motor Vehicles Photo ID/DL # \_\_\_\_\_

Other State Photo ID/DL# \_\_\_\_\_

Passport Photo ID# \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Applicant Signature

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(Office use only)

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Amount Due : [ ] \$58.00 (No Record) [ ] \$87.00 (Criminal Record)

Receipt Number: \_\_\_\_\_

Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

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Office use only