

## This Form is 8½" X 14" Submit Two Copies of This Form

Complainant/Victims will be sent verification free of charge, other applicants must send a **non-refundable** processing fee of \$15.00 (Check or Money Order – **NO CASH**) payable to the NYC Police Department with each application. All applicants must enclose a stamped self-addressed envelope. Please mail requests to: New York City Police Department, Criminal Records Section (Verification Unit), 1 Police Plaza, Room 300, New York, NY 10038.

* Complaint Number	Precinct of Repor	Precinct of Report			RIMINAL RECO	ORDS SECTION	
Mail Record To:							
12 Bedford Ave,	Brooklyn,	NY, 11203	3				
(Print or Type)							
1. Exact location where crime / loss too	ok place				Applicant's File No.	* Precinct of Occurrence	
	•						
1200 Pennsylvania  2. Date reported to Police	a Ave	)	<u> </u>				
•		17:17:33		This report ☐ Crime ☐ Other (describe)			
$\frac{2020-5-3}{\text{3. Full name and address of complaina}}$	concerns:	☐ Lost Prop	епу				
3. Full flame and address of complaina	iniviciini as reported	to Police Department					
	DATE	TIME	Name of officer	who received your r	oport if known		
Date and Time of Crime / Loss of Property (if different	DATE	DATE TIME		Name of officer who received your report, if known.			
than date of report) 5  Any additional information which may a	/1/202	2:00 AM					
It was walking no He was old			round the	corner f	rom CVS		
* INSTRUCTIONS: In order to find (Occurrence). Verification of your re	equest cannot be m	nade without this info	rmation. The com				
squad concerned during the hours Applicant's Signature	or 9 a.m. to 5 p.m.	Date Date		ess of insurance com	npany	Date	
		2020-5-3				2020-5-3	
FOLLOWING IS A VERIFICATION OF		FOR POLICE DE	EPARTMENT U	ISE ONLY			
MOTOR VEHICLES	THE ABOVE REQU	E31					
CURRENCY							
JEWELRY							
FURS – CLOTHING							
FIREARMS							
OFFICE EQUIPMENT							
T.V., RADIOS, CAMERAS, ETC.							
HOUSEHOLD GOODS							
CONSUMABLE GOODS							
MISCELLANEOUS							
BRIEFLY DESCRIBE MANNER OF CF	RIME / LOSS OF PRO	DPERTY					
Alarm No. Report verified	by (print title, name/	(sian)			Da	ite	
Troport vormot	. 5 (F 1805, Harrio)	- J <sup></sup> /					