ANDY WILSON
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BCI CORRECTION FORM FOR CRIMINAL ARREST SUBMISSIONS

Please add/delete/modify the following arrest transmission:
Date:
Submitting agency:

INFORMATION INITIALLY SUBMITTED & ON CCH:

ITN Number _____

DOA _____

DOO_____

Name _____

DOB _____

SSN _____

CHANGES TO BE MADE TO WHAT WAS ORIGINALLY SUBMITTED OR ON CCH:

Additional charge(s):

Delete charge(s):

Modify charge(s)/case number(s):

Other:

Demographic Information Correction(s):

Name _____
DOB _____ SSN _____
Sex _____ Race_____

Submitted by:
Phone # _____
Fax # _____
Email address _____