DEPARTMENT OF CORRECTIONS

Final Disposition Report – Facsimile R-84

to the FBI Identification Division without final disposition is available to arresting agency, also of complete left side and forward the form when the	btain subject's right four finger impressions on this form, he case referred to prosecutor and/or courts. Agency on is form and submit to: Director, FBI, Washington, D.C.	
FBI NUMBER:	Final Disposition and Date: (If convicted or subject pleaded guilty to lesser charge include this modification with disposition.)	
Name of Fingerprint Card Submitted to FBI		
Last First Middle		
Date of Birth: Gender:		
Fingerprint		
Classification From FBI 1-B Response		
State Bureau No. SID Social Security # SOC	This Form Submitted By: (Name, Title, Agency, ORI No., City & State)	
Contributor of Fingerprints (include complete Name and location of agency, together with OR number.		
	Signature Date	
	Title	
Arrest No. OCA Date Arrested/Received	COURT ORDERED EXPUNGEMENT: Return Arrest Fingerprint Card to Contributing Agency; Certified or Authenticated Copy of Court Order Attached.	
Offenses Charged with at Arrest:	Right Four Fingers Taken Simultaneously	

If additional space is needed, check and continue on reverse side of this form.

DEPARTMENT OF CORRECTIONS

Requisition for Ordering Identification		Use for ordering supplied from the FBI
Supplies 1-173 (Rev. 07/03)		Identification Division.)
	1	
To: Federal Bureau of Investigation	Date	
Identification Bureau		
Washington, D.C. 20537		
Please furnish the following:		

Form Number	Description	Quantity
FD-249	Arrest and Institution Fingerprint Cards	
FD-253	Applicant Fingerprint Cards	
FD-353	Personal Identification Fingerprint Cards	
	Envelopes 8.75 x 8.75" Self-Addressed to FBI Ident. Div.	
R-88	Death Sheet Forms	
R-84	Final Disposition Report Forms	
I-12	Wanted Notice Forms	

NOTE: Please check your stock of all supplies and order minimum of six months' requirements	ORI Number
Allow sufficient time for shipment. ORI number must be furnished.	Agency
	Street or P.O. Box No.
	City & State
	Zip Code Number