

TEXAS DEPARTMENT OF PUBLIC SAFETY

PRESS HARD-YOU ARE MAKING THREE COPIES!

SUPPLEMENTAL CRIMINAL HISTORY REPORTING

TRN	DATE OF ARREST (DOA)	DPS NO. (SID)	DATE OF BIRTH (DOB)	SEX	RACE	OUT OF COUNTY? <input type="checkbox"/> YES	OUT OF COUNTY ORI	
ARREST/IDENTIFICATION	NAME (LAST, FIRST, MIDDLE) (NAM)						OUT OF COUNTY WARRANT NO.	
	ADDITIONAL SCARS, MARKS, TATTOOS, AMPUTATIONS (SMT)						LEAVE BLANK	
	ADDITIONAL ALIAS INFORMATION							
	CHARGING AGENCY ORI		CHARGING AGENCY NAME		AGENCY ARREST NO. (AGN)		AGENCY CASE NO. (OCA)	
	TRS	GOC	DOMESTIC VIOLENCE OFFENSE? <input type="checkbox"/> Y or N	OFFENSE CODE (AON)	OFFENSE LITERAL (AOL)			
	VICTIM'S AGE (VIC)		STATUTE CITATION (CIT)		LEVEL & DEGREE <input type="checkbox"/>	FELONY (X,1,2,3 or S)	MISDEMEANOR (A, B or C) <input type="checkbox"/>	DATE OF OFFENSE (DOO)
	WARRANT HOLDER CASE NO.		ARREST DISPOSITION (ADN)	DISPOSITION DATE (ADA)	PROSECUTOR ORI (REF)		TRANS HAZ MATERIAL? <input type="checkbox"/> Y or N	OPER COM VEHICLE? <input type="checkbox"/> Y or N
	PREPARED BY, PLEASE PRINT						DATE	
	PROSECUTOR ORI (ORIP)		PROSECUTOR OFFICE					
	<input type="checkbox"/> PROSECUTOR ACTION CODE USE ONLY ONE CODE. REFER TO PAF CODE LIST.		PROSECUTOR ACTION LITERAL				PROSECUTOR ACTION DATE (PAD)	
TRS FOR ADDED CHARGE	GOC	DOMESTIC VIOLENCE OFFENSE? <input type="checkbox"/> Y or N	CHANGED OR ADDED OFFENSE CODE (PON)	OFFENSE LITERAL (POL)		VICTIM'S AGE (VIC)	STATUTE CITATION (CIT)	
CHARGES FILED IN (COURT ORI)		COURT NAME				LEVEL & DEGREE FELONY (X,1,2,3 or S) <input type="checkbox"/> MISDEMEANOR (A, B, or C) <input type="checkbox"/>		
PREPARED BY, PLEASE PRINT				DATE	ADDITIONAL CHARGES BY PROSECUTOR OR NOT PRESENT AT ARREST? <input type="checkbox"/> Y or N			
COURT ORI (ORIC)		COURT NAME				CAUSE NUMBER (CAU)		
GOC	DOMESTIC VIOLENCE OFFENSE? <input type="checkbox"/> Y or N	OFFENSE CODE (CON)	OFFENSE LITERAL (COL)		VICTIM'S AGE (VIC)	STATUTE CITATION (CIT)	DEGREE OF DISPOSED OFFENSE FELONY (X,1,2,3 or S) <input type="checkbox"/> MISDEMEANOR (A, B, or C) <input type="checkbox"/>	
FINAL PLEA (FPO)	GUilty <input type="checkbox"/>	NO CONTEST <input type="checkbox"/>	NOT GUILTY <input type="checkbox"/>	COURT DISPOSITION DATE (CDD)	SENTENCE/STATUS DATE (DOS)	COURT DISPOSITION (CDN)	COURT COST (CST)	
CONFINEMENT (CMT)		SENTENCE SUSPENDED - TIME (CSS)	PROBATION (CPR)	FINE (CFN)	SENTENCE SUSPENDED-FINE (CSF)			
COURT PROVISION (CPN)		COURT PROVISION LITERAL (CPL)				MULTIPLE SENTENCES (MCC) CONCURRENT <input type="checkbox"/> CONSECUTIVE <input type="checkbox"/>		
AGENCY TO RECEIVE CUSTODY (ARC)			APPEAL DATE (DCA)		OFFENDER STATUS DURING APPEAL (DDA)		RESULT OF APPEAL (FCD)	
CHECK BOX TO INDICATE DIC-17 DATA IS PRESENT <input type="checkbox"/>	BEGINNING DATE OF SUSPENSION		EDUCATION PROGRAMS <input type="checkbox"/>	DWI DRUGS <input type="checkbox"/>	EDUCATION REQUIRED	EDUCATION WAIVED	REPEAT OFFENDER REQUIRED	
	ENDING DATE OF SUSPENSION				EDUCATION COMPLETED	INTERLOCK REQUIRED	REPEAT OFFENDERS COMPLETED	
PREPARED BY, PLEASE PRINT						DATE		
FOR LOCAL AGENCY USE								

IS THE USE OF AN ADDITIONAL SUPPLEMENT REQUIRED ON THIS INCIDENT? YES NO
 MAIL TOP COPY TO: TEXAS DEPARTMENT OF PUBLIC SAFETY PO BOX 4143 AUSTIN TX 78765-4143

WHITE - ARREST REPORTING SHEET YELLOW - PROSECUTOR REPORTING SHEET PINK - COURT REPORTING SHEET