



**NON-CRIMINAL JUSTICE REQUEST FOR
CRIMINAL HISTORY RECORD INFORMATION**
OFFICE OF ATTORNEY GENERAL
BUREAU OF CRIMINAL INVESTIGATION
SFN 50744 (7/99)

<i>FOR BCI USE ONLY</i>	
Check #	
Amount	
Receipt #	
SID #	

INSTRUCTIONS:

1. Please type or print legibly.
2. The required **\$20.00** fee [U.S. Dollars] per record check must be included with this request. The check or money order should be made payable to the North Dakota Attorney General.
3. Be sure **ALL** information is completed. If any of the information is not complete, the request will be returned.
4. The record check results will be mailed to the individual or agency indicated in the requester information block.
5. Return the request to:

Criminal Records Section
North Dakota Bureau of Criminal Investigation
4205 State Street
PO Box 1054
Bismarck ND 58502-1054
(701) 328-5500

Use street address when shipping by next day service.

Unless the non-criminal justice request is accompanied by written authorization signed by the subject, a notice of dissemination must be sent to the subject if any criminal history record is released. **ONLY NORTH DAKOTA RECORDS ARE PROVIDED.**

**INFORMATION CONTAINED ON THIS RECORD REQUEST FORM
IS SUBJECT TO THE NORTH DAKOTA OPEN RECORDS LAW.**

Purpose of Inquiry: _____ (Optional, for statistics only)		
Codes:	A - Adoption B - State Bar Examination C - Child Care (Foster Care)	E - Employment I - Private Investigation M - Military Entrance P - Personal V - Entrance to Foreign Country U - Other

REQUESTER INFORMATION		
Name		
Address		
Address		
City	State	Zip

RECORD CHECK WILL BE CONDUCTED ON INDIVIDUAL LISTED BELOW		
Last Name	First Name (no initials)	Middle Name
(AKA/Maiden/Former) Last Name	First Name	Middle Name
Date of Birth (MM/DD/YYYY)	Social Security Number	
Current Address (If current address is not furnished, a signed authorization must be attached)		
City	State	Zip