

Making Corrections to an Existing Record

WSP

Identification and Criminal History Section

PO Box 42633

Olympia WA 98504-2633

(360) 534-2000

Making Corrections

- The contributing or originating agency may change the submitted arrest information.
- A Department of Corrections (DOC) facility may change DOC information, even if they are not the contributor of the fingerprints.
- The disposition data may be changed only by the county prosecutor or appropriate court.
- The Correction Notice (CN) or the Notice of Arrest (NOA) must be typed or legibly hand written.

Making Corrections

- A CN or NOA may be returned to the submitter for the following reasons:
 - ◆ The handwriting is not legible.
 - ◆ The required information is missing.
 - ◆ The instructions provided are not clear.

Making Corrections

- Do not submit a CN or NOA for the following:
 - ◆ Disposition responsibility ORI. When the disposition information is received from the court, the disposition responsibility ORI will be updated.
 - ◆ INV-all arrests are considered to be investigatory until charges are filed by the prosecutor. There is no need to submit a correction notice to either add or remove the INV notation.
 - ◆ Alias name(s) already listed in the Washington State Identification System (WASIS).

Making Corrections

- Do not submit a CN or NOA for the following (cont.):
 - ◆ To change the order of the information submitted in the comment field.
 - ◆ Amended charges-do not change the original arrest charge to the conviction charge. It is important for all of the arrests for the subject to be in WASIS. It is very common for charges to be reduced or amended to another charge and this information will be captured at the time the disposition is entered into WASIS.

Making Corrections

- Do not submit a CN or NOA for the following (cont.):
 - ◆ To add charges not stemming from the original arrest offense or subsequent wants/warrants check. A new fingerprint arrest card should be submitted in this instance.

Note: A court order is required to expunge, seal, or destroy records.

Making Corrections

- Submit a CN or NOA for the following:
 - ◆ Addition of charges resulting from a wants/warrants check.
 - ◆ Correction of an arrest charge.
 - ◆ Correction of a name or alias name (only if an error was made on the arrest card submission).
 - ◆ Addition of alias names, dates of birth, places of birth, citizenship, or social security numbers.
 - ◆ Incorrect date of birth.

Making Corrections

- Submit a CN or NOA for the following (cont.):
 - ◆ Incorrect date of arrest.
 - ◆ Incorrect date of offense.
 - ◆ Incorrect LID number.
 - ◆ Incorrect OIN number.
 - ◆ Incorrect court case number.
 - ◆ Incorrect gender.
 - ◆ Incorrect contributing or originating ORI.

Making Corrections

- To obtain a CN form go to the Washington Access to Criminal History Criminal Justice (WATCHCJ) website:

<https://fortress.wa.gov/wsp/watchcj/help/forms.html>

- ◆ Email: correctionnotice@wsp.wa.gov
- ◆ Email: Jennifer.Perry@wsp.wa.gov

Making Corrections

- Submitting the CN or NOA:
 - ◆ The CN form.
 - Used to correct, add, or delete information previously submitted on an arrest card.
 - The contributing agency or the originating agency of the arrest card may change or modify the records they submitted.
 - Used to report deceased information (CN only).

Making Corrections


- Submitting the CN or NOA (cont.):
 - ◆ Using the NOA as a CN.
 - The NOA is automatically transmitted to the agency via email or their telecommunications system when an arrest card is entered into WASIS.
 - Used to change, correct, or delete information previously submitted on an arrest card.
 - To receive NOAs contact Jennifer Perry at Jennifer.Perry@wsp.wa.gov.

Making Corrections

- Submitting the CN or NOA (cont.):
 - ◆ Email: correctionnotice@wsp.wa.gov
 - Save the CN under a different name and attach it to an email.
 - Do not place the CN or NOA in the body of the email.
 - Scan the NOA and save; attach it to an email.
 - ◆ Fax: (360) 534-2072
 - ◆ Mail: WSP Criminal History Section, PO Box 42633, Olympia, WA 98504-2633

Completing the CN

- Complete the top Section.
 - ◆ Complete the highlighted fields.
 - ◆ If known, enter the FBI number.

CORRECTION NOTICE		
Date: <u>1/4/2015</u>	SID #: <u>SID WA10000825</u>	
TCN: <u>WA4000003500187312</u>	PCN: <u>004503525</u>	FBI #: <u>9007700</u>

Completing the CN

- Complete Section A.
 - ◆ Complete the highlighted fields.
 - ◆ Complete any additional fields which correspond to the correct to read, add, or delete in Section B.

A - INFORMATION PREVIOUSLY SUBMITTED:				
Subject Fingerprinted:	<u>TRAINING</u>	RECORD	PIPER	
	(Last Name)	(First Name)	(Middle Name)	(Suffix)
Date of Birth:	<u>06/22/1964</u>	Social Security No. _____		
Sex: _____	Race: _____	Hgt: _____	Wgt: _____	Hair: _____ Eye: _____
Alias: _____			POB: _____	CIZ: _____
Contributing Agency ORI:	<u>WA0400000</u>	Date of Arrest:	<u>04/04/2014</u>	Date of Offense: _____
PCN:	<u>004503525</u>	LID:	<u>4239519</u>	OIN: _____
Offense(s):	<u>0052000 Firearms/Dangerous Weapon</u>			
Originating Agency ORI: _____	RCC: _____			
Comments: _____				
(Be specific: other case #, warrant #, agency, counts, citation #, etc.)				

Completing the CN

- Check the appropriate action box.
 - ◆ Check only one action box per correction notice.

<input type="checkbox"/> Correct to Read	<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Deceased	<input type="checkbox"/> Delete
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Reason for deletion
or date of death: _____

Completing the CN

- Action box “Correct to Read”.
 - ◆ In Section B enter only the corrected information.
- Action box “Add”.
 - ◆ In Section B enter only the information to be added to an existing date of arrest (DOA).
 - ◆ Add on charges.
 - A decision is made to add charges to an existing DOA.
 - Subject is booked and after the initial fingerprinting event additional charges are located.

Completing the CN

◆ Add on charges (cont.).

- Outstanding warrant(s) identified.
- Prosecutorial decision to add charges stemming from the same DOA.
- Provide originating agency ORI if it is different than the contributing agency.

The intent of allowing charges to be added to an arrest event via the correction notice add-on charge process is to add charges that are associated to the specific arrest event/date of arrest. As a general rule, add-on charges should occur within 1-2 weeks of the original arrest event. It is not intended to circumvent the fingerprinting process for subsequent charges/arrests for individuals currently incarcerated on prior arrest events. As a general rule, for charges that occur more than 2 weeks after the original arrest event, the subject should be fingerprinted on the new charge(s), as a correction notice or NOA to add-on charges would not be appropriate.

Completing the CN

- Action box “Deceased”.
 - ◆ Enter the date of death (DOD).
 - ◆ No information is entered in Section B.
- Action box “Delete”.
 - ◆ Deleting one charge.
 - In Section B enter only the information for deletion.
 - Enter the reason for the deletion, example “Sent in Error”.

Completing the CN

- Action box “Delete” (cont.).

B - CORRECT INFORMATION TO READ:				
Subject Fingerprinted: _____				
(Last Name)		(First Name)	(Middle Name)	(Suffix)
Date of Birth: _____	Social Security No. _____			
Sex: _____	Race: _____	Hgt: _____	Wgt: _____	Hair: _____ Eye: _____
Alias: _____			POB: _____	CIZ: _____
Contributing Agency ORI: _____		Date of Arrest: _____	Date of Offense: _____	
PCN: _____		LID: _____	OIN: _____	
Offense(s): 0237000 Vehicle Prowling				

Originating Agency ORI: _____		RCC: _____		
Comments: _____				
(Be specific: other case #, warrant #, agency, counts, citation #, etc.)				

- ◆ Deleting an entire arrest.
 - Enter the reason for the deletion.
 - No information is entered in Section B.

Completing the CN

- Complete the “Correction Submitted By” section.
 - ◆ Complete the highlighted boxes with your name and the agency address.

Correction Submitted By:
Name: _____ Submitting person's name
Telephone No. _____ (000) 000-0000

Submitting Agency Address:
_____ Submitting agency name
_____ 123456 Anywhere St.
_____ Somewhere, WA 98501

Correction Notice will be returned if all required (highlighted) information is not provided.

Example:

- Action Box “Correct to Read”.
- ◆ Complete the highlighted fields in Section A.
- ◆ Check the “Correct to Read” action box.
- ◆ Enter what should be corrected in Section B.


*Correcting the offense (reckless driving) in Section A to vehicle prowling in Section B.

CORRECTION NOTICE				WSP WASHINGTON STATE PATROL
Date:	1/4/15	SID #:	WA10000825	
TCN:	WA4000003500187312	PCN:	004503525	
			FBI #: 9007700	
A - INFORMATION PREVIOUSLY SUBMITTED				
Subject Fingerprinted:	Training	Record	Piper	
	(Last Name)	(First Name)	(Middle Name) (Suffix)	
Date of Birth:	06/22/1964	Social Security No.		
Sex:		Race:	Hgt: Wgt: Hair: Eye:	
Alias:	POB:		CIZ:	
Contributing Agency ORI:	WA0400000	Date of Arrest:	12/4/2014	
		Date of Offense:		
PCN:	004503525	LID:	12456987	
		OIN:		
Offense(s):	Reckless Driving			
Originating Agency ORI:	RCC:			
Comments:	(Be specific: other case #, warrant #, agency, counts, citation #, etc.)			
<input checked="" type="checkbox"/> Correct to Read	<input type="checkbox"/> Add	<input type="checkbox"/> Deceased	<input type="checkbox"/> Delete	
			Reason for deletion or date of death:	
B - CORRECT INFORMATION TO READ				
Subject Fingerprinted:				
	(Last Name)	(First Name)	(Middle Name) (Suffix)	
Date of Birth:		Social Security No.		
Sex:		Race:	Hgt: Wgt: Hair: Eye:	
Alias:	POB:		CIZ:	
Contributing Agency ORI:		Date of Arrest:		
		Date of Offense:		
PCN:		LID:		
		OIN:		
Offense(s):	0237000 Vehicle Prowling			
Originating Agency ORI:	RCC:			
Comments:	(Be specific: other case #, warrant #, agency, counts, citation #, etc.)			
Correction Submitted By:		Submitting Agency and Address:		
Name:	Submitting person's name		Submitting agency's name	
Telephone No.:	(000) 000-0000		12546 Anywhere St.	
		SomeWhere, WA 98500		

Correction Notice will be returned if all required (highlighted) information is not provided.

Example:


- Action Box “Correct to Read” (cont.).
 - ◆ When correcting information on an arrest with multiple offenses, enter the offense information in Section A that the correction needs to be made to.
 - ◆ Check the “Correct to Read” action box.
 - ◆ Enter what should be corrected in Section B.

CORRECTION NOTICE				
Date: 1/4/15	SID #: WA10000825			
TCN: WA4000003500187312	PCN: 004503525	FBI #: 9007700		
A - INFORMATION PREVIOUSLY SUBMITTED				
Subject Fingerprinted:	Training _____	Record _____	Piper _____	
	<small>(Last Name)</small>	<small>(First Name)</small>	<small>(Middle Name) (Suffix)</small>	
Date of Birth: 06/22/1964	Social Security No. _____			
Sex: _____	Race: _____	Hgt: _____	Wgt: _____	
Hair: _____		Eye: _____		
Alias: _____		POB: _____	CIZ: _____	
Contributing Agency ORI: WA0400000	Date of Arrest: 12/4/2014	Date of Offense: _____		
PCN: 004503525	LID: 12456987	OIN: CR9845671		
Offense(s): Reckless Driving				
Originating Agency ORI: _____		RCC: _____		
Comments: _____ <small>(Be specific: other case #, warrant #, agency, counts, citation #, etc.)</small>				
<input checked="" type="checkbox"/> Correct to Read		<input type="checkbox"/> Add	<input type="checkbox"/> Deceased	
		<input type="checkbox"/> Delete	Reason for deletion or date of death: _____	
B - CORRECT INFORMATION TO READ				
Subject Fingerprinted:	_____	_____	_____	
	<small>(Last Name)</small>	<small>(First Name)</small>	<small>(Middle Name) (Suffix)</small>	
Date of Birth: _____	Social Security No. _____			
Sex: _____	Race: _____	Hgt: _____	Wgt: _____	
Hair: _____		Eye: _____		
Alias: _____		POB: _____	CIZ: _____	
Contributing Agency ORI: _____	Date of Arrest: _____	Date of Offense: _____		
PCN: _____	LID: _____	OIN: CR5879123		
Offense(s): _____				
Originating Agency ORI: _____		RCC: _____		
Comments: _____ <small>(Be specific: other case #, warrant #, agency, counts, citation #, etc.)</small>				
Correction Submitted By:		Submitting Agency and Address:		
Name: Submitting person's name _____		Submitting agency's name _____		
Telephone No. (000) 000-0000 _____		12546 Anywhere St. _____		
		SomeWhere, WA 98500 _____		

Correction Notice will be returned if all required (highlighted) information is not provided.

Example:


- Action box “Add”.
 - ◆ Complete the highlighted fields in Section A.
 - ◆ Check the “Add” action box.
 - ◆ Enter the alias date of birth in Section B.

CORRECTION NOTICE				
Date: 1/4/15	SID #: WA10000825			
TCN: WA4000003500187312	PCN: 004503525	FBI #: 9007700		
A - INFORMATION PREVIOUSLY SUBMITTED				
Subject Fingerprinted:	Training _____	Record _____	Piper _____	
	<small>(Last Name)</small>	<small>(First Name)</small>	<small>(Middle Name) (Suffix)</small>	
Date of Birth: 06/22/1964	Social Security No. _____			
Sex: _____	Race: _____	Hgt: _____	Wgt: _____	
Hair: _____		Eye: _____		
Alias: _____		POB: _____	CIZ: _____	
Contributing Agency ORI: WA0400000	Date of Arrest: 12/4/2014	Date of Offense: _____		
PCN: 004503525	LID: 12456987	OIN: _____		
Offense(s): _____				
Originating Agency ORI: _____		RCC: _____		
Comments: _____ <small>(Be specific: other case #, warrant #, agency, counts, citation #, etc.)</small>				
<input type="checkbox"/> Correct to Read	<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Deceased	<input type="checkbox"/> Delete	
			Reason for deletion or date of death: _____	
B - CORRECT INFORMATION TO READ				
Subject Fingerprinted:	_____	_____	_____	
	<small>(Last Name)</small>	<small>(First Name)</small>	<small>(Middle Name) (Suffix)</small>	
Date of Birth: _____	Social Security No. _____			
Sex: _____	Race: _____	Hgt: _____	Wgt: _____	
Hair: _____		Eye: _____		
Alias: _____	Date of Birth 09/22/1964	POB: _____	CIZ: _____	
Contributing Agency ORI: _____	Date of Arrest: _____	Date of Offense: _____		
PCN: _____	LID: _____	OIN: _____		
Offense(s): _____				
Originating Agency ORI: _____		RCC: _____		
Comments: _____ <small>(Be specific: other case #, warrant #, agency, counts, citation #, etc.)</small>				
Correction Submitted By:		Submitting Agency and Address:		
Name: _____	Submitting agency's name _____			
Telephone No. (000) 000-0000	12546 Anywhere St. _____			
	SomeWhere, WA 98500 _____			

Correction Notice will be returned if all required (highlighted) information is not provided.

Example:


- Action box “Add” (cont.).
 - ◆ Complete the highlighted fields in Section A.
 - ◆ Check the “Add” action box.
 - ◆ Enter the charge(s) in Section B.

CORRECTION NOTICE				
Date: 1/4/15	SID #: WA10000825			
TCN: WA4000003500187312	PCN: 004503525	FBI #: 9007700		
A - INFORMATION PREVIOUSLY SUBMITTED				
Subject Fingerprinted:	Training _____	Record _____	Piper _____	
	<small>(Last Name)</small>	<small>(First Name)</small>	<small>(Middle Name)</small> <small>(Suffix)</small>	
Date of Birth: 06/22/1964	Social Security No. _____			
Sex: _____	Race: _____	Hgt: _____	Wgt: _____ Hair: _____ Eye: _____	
Alias: _____		POB: _____	CIZ: _____	
Contributing Agency ORI: WA0400000	Date of Arrest: 12/4/2014	Date of Offense: _____		
PCN: 004503525	LID: 12456987	OIN: _____		
Offense(s): _____				
Originating Agency ORI: _____		RCC: _____		
Comments: _____ <small>(Be specific: other case #, warrant #, agency, counts, citation #, etc.)</small>				
<input type="checkbox"/> Correct to Read	<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Deceased	<input type="checkbox"/> Delete Reason for deletion or date of death: _____	
B - CORRECT INFORMATION TO READ				
Subject Fingerprinted: _____				
	<small>(Last Name)</small>	<small>(First Name)</small>	<small>(Middle Name)</small> <small>(Suffix)</small>	
Date of Birth: _____		Social Security No. _____		
Sex: _____	Race: _____	Hgt: _____	Wgt: _____ Hair: _____ Eye: _____	
Alias: _____		POB: _____	CIZ: _____	
Contributing Agency ORI: _____		Date of Arrest: _____	Date of Offense: _____	
PCN: _____		LID: _____	OIN: _____	
Offense(s): 0231000 Residential Burg; 0231800 Possess Burglary Tools				
Originating Agency ORI: _____		RCC: _____		
Comments: _____ <small>(Be specific: other case #, warrant #, agency, counts, citation #, etc.)</small>				
Correction Submitted By:		Submitting Agency and Address:		
Name: Submitting person's name _____		Submitting agency's name _____		
Telephone No. (000) 000-0000 _____		12546 Anywhere St. _____		
		SomeWhere, WA 98500 _____		

Correction Notice will be returned if all required (highlighted) information is not provided.

Example:


- Action box “Deceased”.
 - ◆ Complete the highlighted fields in Section A.
 - ◆ Check the “Deceased” action box.
 - ◆ Enter the date of death.
 - ◆ Leave Section B blank.

CORRECTION NOTICE				
Date: 1/4/15	SID #: WA10000825			
TCN: _____	PCN: _____	FBI #: 9007700		
A - INFORMATION PREVIOUSLY SUBMITTED				
Subject Fingerprinted: _____	Training _____	Record _____	Piper _____	
	<small>(Last Name)</small>	<small>(First Name)</small>	<small>(Middle Name)</small>	<small>(Suffix)</small>
Date of Birth: 06/22/1964	Social Security No. _____			
Sex: _____	Race: _____	Hgt: _____	Wgt: _____	Hair: _____ Eye: _____
Alias: _____			POB: _____	CIZ: _____
Contributing Agency ORI: WA0400000	Date of Arrest: _____	Date of Offense: _____		
PCN: _____	LID: _____	OIN: _____		
Offense(s): _____				
Originating Agency ORI: _____ RCC: _____				
Comments: _____ <small>(Be specific: other case #, warrant #, agency, counts, citation #, etc.)</small>				
<input type="checkbox"/> Correct to Read		<input type="checkbox"/> Add		<input checked="" type="checkbox"/> Deceased
				<input type="checkbox"/> Delete Reason for deletion or date of death: 01/10/2015
B - CORRECT INFORMATION TO READ				
Subject Fingerprinted: _____				
	<small>(Last Name)</small>	<small>(First Name)</small>	<small>(Middle Name)</small>	<small>(Suffix)</small>
Date of Birth: _____		Social Security No. _____		
Sex: _____	Race: _____	Hgt: _____	Wgt: _____	Hair: _____ Eye: _____
Alias: _____			POB: _____	CIZ: _____
Contributing Agency ORI: _____		Date of Arrest: _____		Date of Offense: _____
PCN: _____		LID: _____		OIN: _____
Offense(s): _____				
Originating Agency ORI: _____ RCC: _____				
Comments: _____ <small>(Be specific: other case #, warrant #, agency, counts, citation #, etc.)</small>				
Correction Submitted By:			Submitting Agency and Address:	
Name: Submitting person's name _____			Submitting agency's name _____	
Telephone No. (000) 000-0000 _____			12546 Anywhere St. _____	
			SomeWhere, WA 98500 _____	

Correction Notice will be returned if all required (highlighted) information is not provided.

Example:


- Action box “Delete”.
 - ◆ Complete the highlighted fields in Section A.
 - ◆ Check the “Delete” action box.
 - ◆ Enter the reason for the deletion.
 - ◆ In Section B, enter the information to be deleted.

CORRECTION NOTICE			
Date: 1/4/15	SID #: WA10000825		
TCN: WA400003500187312	PCN: 004503525	FBI #: 9007700	
A - INFORMATION PREVIOUSLY SUBMITTED			
Subject Fingerprinted:	Training _____	Record _____	Piper _____
	(Last Name)	(First Name)	(Middle Name) (Suffix)
Date of Birth: 06/22/1964	Social Security No. _____		
Sex: _____	Race: _____	Hgt: _____	Wgt: _____ Hair: _____ Eye: _____
Alias: _____		POB: _____	CIZ: _____
Contributing Agency ORI: WA0400000	Date of Arrest: 04/04/2014	Date of Offense: _____	
PCN: 004503525	LID: 12456987	OIN: _____	
Offense(s): _____			
Originating Agency ORI: _____ RCC: _____			
Comments: _____ <small>(Be specific: other case #, warrant #, agency, counts, citation #, etc.)</small>			
<input type="checkbox"/> Correct to Read		<input type="checkbox"/> Add	<input type="checkbox"/> Deceased
<input checked="" type="checkbox"/> Delete		Reason for deletion or date of death: Sent in Error	
B - CORRECT INFORMATION TO READ			
Subject Fingerprinted:			
	(Last Name)	(First Name)	(Middle Name) (Suffix)
Date of Birth: _____	Social Security No. _____		
Sex: _____	Race: _____	Hgt: _____	Wgt: _____ Hair: _____ Eye: _____
Alias: _____		POB: _____	CIZ: _____
Contributing Agency ORI: _____	Date of Arrest: _____	Date of Offense: _____	
PCN: _____	LID: _____	OIN: _____	
Offense(s): 0952600 Eluding Enforcement Vessel Water Craft			
Originating Agency ORI: _____ RCC: _____			
Comments: _____ <small>(Be specific: other case #, warrant #, agency, counts, citation #, etc.)</small>			
Correction Submitted By:		Submitting Agency and Address:	
Name: Submitting person's name	Submitting agency's name		
Telephone No. (000) 000-0000	12546 Anywhere St.		
	SomeWhere, WA 98500		

Correction Notice will be returned if all required (highlighted) information is not provided.

Example:

- Action box “Delete” (cont.)
- Deleting an entire arrest.
 - ◆ Complete the highlighted fields in Section A.
 - ◆ Check the “Delete” action box.
 - ◆ Enter the reason for the deletion.
 - ◆ Leave Section B blank.

CORRECTION NOTICE		
Date: 1/4/15	SID #: WA10000825	
TCN: WA400003500187312	PCN: 004503525	FBI #: 9007700
A - INFORMATION PREVIOUSLY SUBMITTED		
Subject Fingerprinted: _____	Training _____	Record _____
	(Last Name)	(First Name) (Middle Name) (Suffix)
Date of Birth: 06/22/1964	Social Security No. _____	
Sex: _____	Race: _____	Hgt: _____ Wgt: _____
Hair: _____		Eye: _____
Alias: _____		POB: _____ CIZ: _____
Contributing Agency ORI: WA0400000	Date of Arrest: 12/4/2014	Date of Offense: _____
PCN: 004503525	LID: 12456987	OIN: _____
Offense(s): 0952600 Eluding Enforcement Vessel Water Craft		
Originating Agency ORI: _____		RCC: _____
Comments: _____ (Be specific: other case #, warrant #, agency, counts, citation #, etc.)		
<input type="checkbox"/> Correct to Read	<input type="checkbox"/> Add	<input type="checkbox"/> Deceased
<input checked="" type="checkbox"/> Delete	Reason for deletion or date of death: Sent in Error	
B - CORRECT INFORMATION TO READ		
Subject Fingerprinted: _____		
	(Last Name)	(First Name) (Middle Name) (Suffix)
Date of Birth: _____		Social Security No. _____
Sex: _____	Race: _____	Hgt: _____ Wgt: _____
Hair: _____		Eye: _____
Alias: _____		POB: _____ CIZ: _____
Contributing Agency ORI: _____		Date of Arrest: _____ Date of Offense: _____
PCN: _____		LID: _____ OIN: _____
Offense(s): _____		
Originating Agency ORI: _____		RCC: _____
Comments: _____ (Be specific: other case #, warrant #, agency, counts, citation #, etc.)		
Correction Submitted By:		Submitting Agency and Address:
Name: Submitting person's name _____	Submitting agency's name _____	
Telephone No. (000) 000-0000 _____	12546 Anywhere St. _____	
	SomeWhere, WA 98500 _____	

Correction Notice will be returned if all required (highlighted) information is not provided.

Notice of Arrest

- Using a NOA to make a correction.
 - ◆ A NOA may be submitted instead of a CN form to make a correction, add, or delete information.
 - If a large amount of information needs to be changed or added to the arrest record a CN may be a better option.
 - Type or legibly hand write the information on the NOA.

Notice of Arrest

- Using a NOA to make a correction (cont.).
 - ◆ Required information:
 - Current date.
 - Action to be taken (correct to read, add, or delete).
 - Name, address, and telephone number of the person submitting the NOA.
 - ◆ NOAs are submitted in the same manner as the CN.
 - ◆ If your agency does not currently receive NOAs and would like to, contact Jennifer Perry at Jennifer.Perry@wsp.wa.gov.

Example:

- Correct to Read.
 - ◆ Line through the information to be corrected.
 - ◆ Enter the corrected information.

*Highlighting is for training purposes.

WASHINGTON STATE PATROL/WASIS NOTICE OF ARREST DATE 11/14/2014

ATTENTION: CONTRIBUTING ORI WSPDOOOO

SID NUMBER WA10000825
ARRESTEE NAME RECORD, TRAINING
AKA*FIESTY, FIGHTER
BIRTHDATE ~~01/10/1982~~
Correct to Read:
Birthdate 1/10/1985
FBI NO. 90007700

PCN 004503643 TCN WA4000100050755834

Correct to Read: Originating Agency
OFFENSE ORI WA0401000

ORIGINATING ORI ~~WA0400000~~ DATE OF ARREST 11/11/2014 LID/OCA B2057915
ANY LAW ENFORCEMENT AGENCY
CITY AND STATE

UNIQUE NO (OIN) 1254983 COURT CASE NO. WARRANT NO.

CHARGE: 08401000 MUNICIPALITIES/COUNTY CODE VIOLATION-NON FELONY

RCW: 35.36.00.000
DOMESTIC VIOLENCE
CLASS UNKNOWN

COMMENTS: AMC/12X.06.180/VIOLATE NO CONTACT ORDER
DISPOSITION RESPONSIBILITY: COURT ORI
AGENCY: COURT NAME
CITY AND STATE

Date:
Submitted by:
Submitting person's name:
Telephone number:
Submitting Agency Name:
Submitting Agency Address:

Example:

- Add.
 - ◆ Add the new information.
 - ◆ Use a CN to add multiple charges, etc.

WASHINGTON STATE PATROL/WASIS

NOTICE OF ARREST

DATE 11/14/2014

ATTENTION: CONTRIBUTING ORI WSPDOOOO

SID NUMBER
WA10000825

ARRESTEE NAME
RECORD, TRAINING
AKA*FIESTY, FIGHTER

BIRTHDATE
01/10/1982

FBI NO.
90007700

PCN 004503643

TCN WA4000100050755834

OFFENSE

ORIGINATING ORI WA0400000
ANY LAW ENFORCEMENT AGENCY
CITY AND STATE

DATE OF ARREST
11/11/2014

LID/OCA
B2057915

UNIQUE NO (OIN)
1254983

COURT CASE NO.

WARRANT NO.

CHARGE: 08401000 MUNICIPALITIES/COUNTY CODE VIOLATION-NON FELONY

RCW: 35.36.00.000
DOMESTIC VIOLENCE
CLASS UNKNOWN

ADD: DRIVING UNDER THE
INFLUENCE

Date:
Submitted by:
Submitting person's name:
Telephone number:
Submitting Agency Name:
Submitting Agency Address:

COMMENTS: AMC/12X.06.180/VIOLATE NO CONTACT ORDER
DISPOSITION RESPONSIBILITY: COURT ORI
AGENCY: COURT NAME
CITY AND STATE

Example:

- Delete.
 - ◆ Line through the information to be deleted.
 - ◆ Enter the reason.

WASHINGTON STATE PATROL/WASIS

NOTICE OF ARREST

DATE 11/14/2014

ATTENTION: CONTRIBUTING ORI WSPDOOOO

SID NUMBER
WA10000825

ARRESTEE NAME
RECORD, TRAINING
AKA*FIESTY, FIGHTER

BIRTHDATE
01/10/1982

FBI NO.
90007700

PCN 004503643

TCN WA4000100050755834

OFFENSE

ORIGINATING ORI WA0400000
ANY LAW ENFORCEMENT AGENCY
CITY AND STATE

DATE OF ARREST
11/11/2014

LID/OCA
B2057915

UNIQUE NO (OIN)
1254983

COURT CASE NO.

WARRANT NO.

CHARGE: 08401000 MUNICIPALITIES/COUNTY CODE VIOLATION-NON FELONY

RCW: 35.36.00.000 Delete domestic violence from the offense.

~~DOMESTIC VIOLENCE~~

Reason: Sent in error

CLASS UNKNOWN

COMMENTS: AMC/12X.06.180/VIOLATE NO CONTACT ORDER

DISPOSITION RESPONSIBILITY: COURT ORI

AGENCY: COURT NAME

CITY AND STATE

Date:

Submitted by:

Submitting person's name:

Telephone number:

Submitting Agency Name:

Submitting Agency Address:

Example:

- Delete entire arrest.
 - ◆ Indicate what is to be deleted.
 - ◆ Enter the reason.

WASHINGTON STATE PATROL/WASIS

NOTICE OF ARREST

DATE 11/14/2014

ATTENTION: CONTRIBUTING ORI WSPDOOOO

SID NUMBER ARRESTEE NAME BIRTHDATE
WA10000825 RECORD, TRAINING 01/10/1982
AKA*FIESTY, FIGHTER

FBI NO.
90007700

PCN 004503643

TCN WA4000100050755834

OFFENSE

ORIGINATING ORI WA0400000 DATE OF ARREST LID/OCA
ANY LAW ENFORCEMENT AGENCY 11/11/2014 B2057915
CITY AND STATE

UNIQUE NO (OIN) COURT CASE NO. WARRANT NO.
1254983

CHARGE: 08401000 MUNICIPALITIES/COUNTY CODE VIOLATION-NON FELONY

RCW: 35.36.00.000 Delete entire arrest.

DOMESTIC VIOLENCE Reason: Sent in error

CLASS UNKNOWN

COMMENTS: AMC/12X.06.180/VIOLATE NO CONTACT ORDER

DISPOSITION RESPONSIBILITY: COURT ORI

AGENCY: COURT NAME

CITY AND STATE

Date:
Submitted by:
Submitting person's name:
Telephone number:
Submitting Agency Name:
Submitting Agency Address:

Questions

- Jennifer Perry, Criminal History Records Supervisor (360) 534-2113
- Criminal History Records Specialists:
 - ◆ Tina Marshall (360) 534-2116
 - Adams, Asotin, Benton, Chelan, Clark, Columbia, Douglas, Grays Harbor, Island, Kitsap, Pacific, Pierce, San Juan, and SPD.
 - ◆ Jo Ann Carrasquillo (360) 534-2129
 - Clallam, Cowlitz, Franklin, Garfield, Kittitas, Klickitat, Mason, Snohomish, Spokane, Stevens, Wahkiakum, Whitman, King Co. (except SPD & KCS)
 - ◆ Debra Tafoya (360) 534-2123
 - Ferry, Grant, Jefferson, Lewis, Lincoln, Okanogan, Pend Oreille, Skagit, Skamania, Thurston, Walla Walla, Whatcom, Yakima, KCS.