



Figure #1


|  <b>SUPPLEMENTAL ACTION<br/>PROSECUTING ATTORNEY/CIRCUIT ATTORNEY<br/>&amp; COURT ACTION</b> <span style="float: right;">SHP-294</span> |                            |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--------------------------|
| DEFENDANT'S NAME                                                                                                                                                                                                         | LAST                       | FIRST MIDDLE             |
| DATE OF BIRTH                                                                                                                                                                                                            | OFFENSE CYCLE NUMBER (OCN) | STATE IDENT NUMBER (SID) |
| CHARGE(S) COUNT NUMBER(S)                                                                                                                                                                                                |                            |                          |
| CHANGE(S) IN PROSECUTOR'S ACTION                                                                                                                                                                                         |                            |                          |
| ADDITIONAL COURT DISPOSITION                                                                                                                                                                                             |                            |                          |
| SENTENCE REVERSED & REMANDED                                                                                                                                                                                             | COUNT NO.                  | DATE                     |
| PROBATION REVOKED (EXPLAIN ACTION)                                                                                                                                                                                       | COUNT NO.                  | DATE                     |
| EXPUNGEMENT                                                                                                                                                                                                              | COUNT NO.                  | DATE                     |
| JUDGEMENT OF DISCHARGE                                                                                                                                                                                                   | COUNT NO.                  | DATE                     |
| OTHER (EXPLAIN IN DETAIL)                                                                                                                                                                                                | COUNT NO.                  | DATE                     |
| COMMENTS:                                                                                                                                                                                                                |                            |                          |
| REPORTING AGENCY NAME/ORI                                                                                                                                                                                                |                            |                          |
| DATE                                                                                                                                                                                                                     | SIGNATURE                  |                          |

Figure #2

| FINGERPRINT CARD                                                                                                                                                                                             |                               | MISSOURI HIGHWAY PATROL, GENERAL HEADQUARTERS, P. O. BOX 568, JEFFERSON CITY, MO 65102 TELEPHONE NO. 314 751-3313                                                                                                                |                            |                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--------------------------------------|
| PALM PRINTS TAKEN? <input type="checkbox"/> YES <input type="checkbox"/> NO<br><b>22</b><br>PHOTO AVAILABLE? <input type="checkbox"/> YES <input type="checkbox"/> NO <span style="font-size: 2em;">→</span> |                               | IF AVAILABLE, PASTE PHOTO HERE NO STAPLES<br>SINCE PHOTOGRAPH MAY BECOME DETACHED INDICATE NAME, DATE TAKEN, FBI NUMBER, CONTRIBUTOR AND ARREST NUMBER ON REVERSE SIDE, WHETHER ATTACHED TO FINGERPRINT CARD OR SUBMITTED LATER. |                            |                                      |
| ARRESTING AGENCY - NAME - ORI<br><b>23</b>                                                                                                                                                                   |                               |                                                                                                                                                                                                                                  |                            |                                      |
| COUNTY OF ARREST<br><b>24</b>                                                                                                                                                                                | ARRESTING OFFICER'S BADGE NO. |                                                                                                                                                                                                                                  |                            |                                      |
| STATUTE-RSMO/LOCAL ORDINANCE<br><b>25</b><br>2.<br>3.<br>4.                                                                                                                                                  | MISSOURI CHARGE CODE          |                                                                                                                                                                                                                                  |                            |                                      |
| ARREST DISPOSITION<br><b>26</b>                                                                                                                                                                              |                               |                                                                                                                                                                                                                                  |                            |                                      |
| EMPLOYER - NAME AND ADDRESS<br><b>27</b>                                                                                                                                                                     |                               |                                                                                                                                                                                                                                  |                            |                                      |
| OCCUPATION<br><b>28</b>                                                                                                                                                                                      |                               |                                                                                                                                                                                                                                  |                            | SEND ADDITIONAL COPY TO<br><b>34</b> |
| RESIDENCE OF PERSON FINGERPRINTED<br><b>29</b>                                                                                                                                                               |                               |                                                                                                                                                                                                                                  |                            |                                      |
| SCARS, MARKS, TATTOOS, AND AMPUTATIONS <u>SMT</u><br><b>30</b>                                                                                                                                               |                               |                                                                                                                                                                                                                                  |                            |                                      |
| BASIS FOR CAUTION <u>ICO</u><br><b>31</b>                                                                                                                                                                    |                               |                                                                                                                                                                                                                                  |                            |                                      |
| DATE OF OFFENSE <u>DOO</u><br><b>32</b>                                                                                                                                                                      |                               | LEAVE BLANK                                                                                                                                                                                                                      | DO NOT WRITE IN THIS SPACE |                                      |
| ADDITIONAL INFORMATION<br><b>33</b>                                                                                                                                                                          |                               |                                                                                                                                                                                                                                  | FILMED                     |                                      |
|                                                                                                                                                                                                              |                               |                                                                                                                                                                                                                                  | NAME SEARCH                |                                      |
|                                                                                                                                                                                                              |                               |                                                                                                                                                                                                                                  | CLASS                      |                                      |
|                                                                                                                                                                                                              |                               |                                                                                                                                                                                                                                  | FP SEARCH                  |                                      |
|                                                                                                                                                                                                              |                               |                                                                                                                                                                                                                                  | CODED                      |                                      |
|                                                                                                                                                                                                              |                               |                                                                                                                                                                                                                                  | TERMINAL OPR               |                                      |
|                                                                                                                                                                                                              |                               |                                                                                                                                                                                                                                  | ANSWERED                   |                                      |
|                                                                                                                                                                                                              |                               |                                                                                                                                                                                                                                  | SHP-108C                   |                                      |

Figure #3

|                                                                  |                                           |                                             |                                                 |                                                          |                           |
|------------------------------------------------------------------|-------------------------------------------|---------------------------------------------|-------------------------------------------------|----------------------------------------------------------|---------------------------|
| SID NO. MO.                                                      |                                           | LAST NAME <u>NAM</u> FIRST NAME MIDDLE NAME |                                                 | OFFENSE CYCLE NO<br><b>88050602</b>                      |                           |
| LOCAL OFFENSE CYCLE NUMBER                                       |                                           | ALIASES                                     |                                                 | CONTRIBUTOR ORI                                          |                           |
| SIGNATURE OF PERSON FINGERPRINTED                                |                                           |                                             |                                                 | LEAVE BLANK                                              |                           |
| THIS DATA MAY BE COMPUTERIZED IN LOCAL, STATE AND NATIONAL FILES |                                           | DATE ARRESTED OR RECEIVED <u>DOA</u>        |                                                 | DATE OF BIRTH <u>DOB</u>                                 |                           |
| DATE                                                             | SIGNATURE OF OFFICIAL TAKING FINGERPRINTS |                                             | SEX <u>RACE</u> HGT <u>WGT</u> EYES <u>HAIR</u> |                                                          | PLACE OF BIRTH <u>POB</u> |
| CHARGE & NCIC OFFENSE CODE OFFENSE TYPE (F) (M) (O)              |                                           | YOUR NO. <u>OCA</u>                         |                                                 | ACTION TAKEN BY PROSECUTING ATTORNEY OR CIRCUIT ATTORNEY |                           |
| 1.                                                               | FBI NO. <u>FBI</u>                        |                                             | 1 <b>1</b>                                      |                                                          |                           |
| 2.                                                               | SID NO. <u>SID</u>                        |                                             | 2.                                              |                                                          |                           |
| 3.                                                               | SOCIAL SECURITY NO. <u>SOC</u>            |                                             | 3.                                              |                                                          |                           |
| 4.                                                               | PROSECUTOR'S CASE NO.<br><b>2</b>         |                                             | 4.                                              |                                                          |                           |
|                                                                  |                                           | PROSECUTOR'S ORI NO.<br><b>3</b>            |                                                 |                                                          |                           |
|                                                                  |                                           | DATE<br><b>4</b>                            |                                                 | SIGNATURE<br><b>5</b>                                    |                           |

THE PROSECUTING ATTORNEY OR CIRCUIT ATTORNEY SHALL NOTIFY THE MISSOURI STATE HIGHWAY PATROL CRIMINAL RECORD DIVISION OF ACTION TAKEN

Figure #4

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                           |                                                  |                           |                                           |                                         |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------|---------------------------|-------------------------------------------|-----------------------------------------|-------------------------------|-----------|--|--|--|--|--|--|-------------|-------------|--------------|------------|--------------|--|--|-------------|-------------|--------------|------------|---------------|--|--|----------------------------------------|--|--|----------|----------|-----------------------------------------|--|
| SID NO. MO.<br><b>1</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                           | LAST NAME NAM FIRST NAME MIDDLE NAME<br><b>2</b> |                           |                                           | OFFENSE CYCLE NO.<br><b>3 86059003</b>  |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| LOCAL OFFENSE CYCLE NUMBER<br><b>4</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           | ALIASES<br><b>5</b>                              |                           | CONTRIBUTOR ORI<br><b>6</b>               |                                         | LEAVE BLANK<br><b>7</b>       |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| SIGNATURE OF PERSON FINGERPRINTED<br><b>8</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                           | DATE ARRESTED OR RECEIVED DOA<br><b>13</b>       |                           | SEX RACE HGT. WGT. EYES HAIR<br><b>11</b> |                                         | DATE OF BIRTH DOB<br><b>9</b> |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| THIS DATA MAY BE COMPUTERIZED IN LOCAL, STATE AND NATIONAL FILES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           |                                                  |                           | PLACE OF BIRTH POB<br><b>12</b>           |                                         |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| DATE<br><b>10</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | SIGNATURE OF OFFICIAL TAKING FINGERPRINTS |                                                  | YOUR NO. OCA<br><b>14</b> |                                           | LEAVE BLANK                             |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| CHARGE & NCIC OFFENSE CODE OFFENSE TYPE (F) (M) (O)<br><b>15</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                           | FBI NO. FBI<br><b>16</b>                         |                           | CLASS.<br><b>17</b>                       |                                         |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| 2.<br>3.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                           | SID NO. SID<br><b>18</b>                         |                           | REF.                                      |                                         |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| FINAL DISPOSITION WARRANT NO.<br><b>19</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                           | SOCIAL SECURITY NO. SOC.<br><b>20</b>            |                           | NCIC CLASS - FPC                          |                                         |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| <table border="1" style="width:100%; height:100%; text-align:center;"> <tr> <td colspan="7"><b>21</b></td> </tr> <tr> <td>1. R. THUMB</td> <td>2. R. INDEX</td> <td>3. R. MIDDLE</td> <td>4. R. RING</td> <td>5. R. LITTLE</td> <td colspan="2"></td> </tr> <tr> <td>6. L. THUMB</td> <td>7. L. INDEX</td> <td>8. L. MIDDLE</td> <td>9. L. RING</td> <td>10. L. LITTLE</td> <td colspan="2"></td> </tr> <tr> <td colspan="3">LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY</td> <td>L. THUMB</td> <td>R. THUMB</td> <td colspan="2">RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY</td> </tr> </table> |                                           |                                                  |                           |                                           |                                         |                               | <b>21</b> |  |  |  |  |  |  | 1. R. THUMB | 2. R. INDEX | 3. R. MIDDLE | 4. R. RING | 5. R. LITTLE |  |  | 6. L. THUMB | 7. L. INDEX | 8. L. MIDDLE | 9. L. RING | 10. L. LITTLE |  |  | LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY |  |  | L. THUMB | R. THUMB | RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY |  |
| <b>21</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                           |                                                  |                           |                                           |                                         |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| 1. R. THUMB                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2. R. INDEX                               | 3. R. MIDDLE                                     | 4. R. RING                | 5. R. LITTLE                              |                                         |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| 6. L. THUMB                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 7. L. INDEX                               | 8. L. MIDDLE                                     | 9. L. RING                | 10. L. LITTLE                             |                                         |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |
| LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           |                                                  | L. THUMB                  | R. THUMB                                  | RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY |                               |           |  |  |  |  |  |  |             |             |              |            |              |  |  |             |             |              |            |               |  |  |                                        |  |  |          |          |                                         |  |




Figure #5

|                                                                  |  |                                           |  |                                |  |                                                          |  |                                     |  |
|------------------------------------------------------------------|--|-------------------------------------------|--|--------------------------------|--|----------------------------------------------------------|--|-------------------------------------|--|
| SID NO. MO.                                                      |  | LAST NAME <u>NAM</u>                      |  | FIRST NAME                     |  | MIDDLE NAME                                              |  | OFFENSE CYCLE NO<br><b>88050601</b> |  |
| LOCAL OFFENSE CYCLE NUMBER                                       |  | ALIASES                                   |  | CONTRIBUTOR <u>ORI</u>         |  | LEAVE BLANK                                              |  |                                     |  |
| SIGNATURE OF PERSON FINGERPRINTED                                |  |                                           |  |                                |  | DATE OF BIRTH <u>DOB</u>                                 |  |                                     |  |
| THIS DATA MAY BE COMPUTERIZED IN LOCAL, STATE AND NATIONAL FILES |  | DATE ARRESTED OR RECEIVED <u>DOA</u>      |  | SEX                            |  | RACE                                                     |  | HGT                                 |  |
| DATE                                                             |  | SIGNATURE OF OFFICIAL TAKING FINGERPRINTS |  | WGT                            |  | EYES                                                     |  | HAIR                                |  |
| CHARGE & NCIC OFFENSE CODE                                       |  | OFFENSE TYPE (F) (M) (O)                  |  | YOUR NO. <u>OCA</u>            |  | ACTION TAKEN BY PROSECUTING ATTORNEY OR CIRCUIT ATTORNEY |  |                                     |  |
| 1.                                                               |  |                                           |  | FBI NO. <u>FBI</u>             |  | 1                                                        |  |                                     |  |
| 2.                                                               |  |                                           |  | SID NO. <u>SID</u>             |  | 2                                                        |  |                                     |  |
| 3.                                                               |  |                                           |  | SOCIAL SECURITY NO. <u>SOC</u> |  | 3                                                        |  |                                     |  |
| 4.                                                               |  |                                           |  | PROSECUTOR'S CASE NO.          |  | 4                                                        |  |                                     |  |
|                                                                  |  |                                           |  | PROSECUTOR'S ORI NO.           |  |                                                          |  |                                     |  |
|                                                                  |  |                                           |  | DATE                           |  | SIGNATURE                                                |  |                                     |  |

|                      | COURT CASE NUMBER  | FINAL CHARGE                     | OFFENSE TYPE (F) (M) | ADJUDICATION   | DISP DATE       |
|----------------------|--------------------|----------------------------------|----------------------|----------------|-----------------|
| 1                    | <b>1</b>           | <b>2</b>                         |                      | <b>3</b>       | <b>4</b>        |
|                      | LENGTH OF SENTENCE | CC CS WITH OCN/COURT CASE NUMBER | COUNT NUMBER SES     | PROBATION TERM | SIS FINE STAYED |
|                      | <b>5</b>           | <b>6 7</b>                       | <b>8 9</b>           | <b>10 11</b>   | <b>12</b>       |
| 2                    | COURT CASE NUMBER  | FINAL CHARGE                     | OFFENSE TYPE (F) (M) | ADJUDICATION   | DISP DATE       |
|                      | LENGTH OF SENTENCE | CC CS WITH OCN/COURT CASE NUMBER | COUNT NUMBER SES     | PROBATION TERM | SIS FINE STAYED |
|                      |                    |                                  |                      |                | \$ \$           |
| 3                    | COURT CASE NUMBER  | FINAL CHARGE                     | OFFENSE TYPE (F) (M) | ADJUDICATION   | DISP DATE       |
|                      | LENGTH OF SENTENCE | CC CS WITH OCN/COURT CASE NUMBER | COUNT NUMBER SES     | PROBATION TERM | SIS FINE STAYED |
|                      |                    |                                  |                      |                | \$ \$           |
| 4                    | COURT CASE NUMBER  | FINAL CHARGE                     | OFFENSE TYPE (F) (M) | ADJUDICATION   | DISP DATE       |
|                      | LENGTH OF SENTENCE | CC CS WITH OCN/COURT CASE NUMBER | COUNT NUMBER SES     | PROBATION TERM | SIS FINE STAYED |
|                      |                    |                                  |                      |                | \$ \$           |
| 5                    | COURT CASE NUMBER  | FINAL CHARGE                     | OFFENSE TYPE (F) (M) | ADJUDICATION   | DISP DATE       |
|                      | LENGTH OF SENTENCE | CC CS WITH OCN/COURT CASE NUMBER | COUNT NUMBER SES     | PROBATION TERM | SIS FINE STAYED |
|                      |                    |                                  |                      |                | \$ \$           |
| COMMENTS             |                    |                                  |                      |                |                 |
| <b>13</b>            |                    |                                  |                      |                |                 |
| REPORTING AGENCY/ORI |                    | DATE                             | SIGNATURE            |                |                 |
| <b>14</b>            |                    | <b>15</b>                        | <b>16</b>            |                |                 |

UPON NOTICE OF FINAL DISPOSITION, FORWARD TO MISSOURI STATE HIGHWAY PATROL, CRIMINAL RECORDS DIVISION

Figure #6

|  <b>SUPPLEMENTAL ACTION<br/>PROSECUTING ATTORNEY/CIRCUIT ATTORNEY<br/>&amp; COURT ACTION</b> |                    |                            | SHP-294 |                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|----------------------------|---------|--------------------------|
| DEFENDANT'S NAME                                                                                                                                                              | <b>1</b>           | LAST                       | FIRST   | MIDDLE                   |
| DATE OF BIRTH                                                                                                                                                                 | <b>2</b>           | OFFENSE CYCLE NUMBER (OCN) |         | STATE IDENT NUMBER (SID) |
| CHARGE(S) COUNT NUMBER(S)                                                                                                                                                     |                    |                            |         |                          |
| <b>3</b>                                                                                                                                                                      |                    |                            |         |                          |
| CHANGE(S) IN PROSECUTOR'S ACTION                                                                                                                                              |                    |                            |         |                          |
| <b>4</b> ADDITIONAL COURT DISPOSITION                                                                                                                                         |                    |                            |         |                          |
| SENTENCE REVERSED & REMANDED                                                                                                                                                  | COUNT NO.          | DATE                       |         |                          |
| PROBATION REVOKED (EXPLAIN ACTION)                                                                                                                                            | COUNT NO.          | DATE                       |         |                          |
| EXPUNGEMENT                                                                                                                                                                   | COUNT NO.          | DATE                       |         |                          |
| JUDGEMENT OF DISCHARGE                                                                                                                                                        | COUNT NO.          | DATE                       |         |                          |
| OTHER (EXPLAIN IN DETAIL)                                                                                                                                                     | COUNT NO.          | DATE                       |         |                          |
| COMMENTS:                                                                                                                                                                     |                    |                            |         |                          |
| <b>5</b>                                                                                                                                                                      |                    |                            |         |                          |
| REPORTING AGENCY NAME/ORI <b>6</b>                                                                                                                                            |                    |                            |         |                          |
| DATE <b>7</b>                                                                                                                                                                 | SIGNATURE <b>8</b> |                            |         |                          |