

LEAVE BLANK

CRIMINAL

(STAPLE HERE)

LEAVE BLANK

STATE USAGE

NFF SECOND

SUBMISSION

APPROXIMATE CLASS

AMPUTATION

SCAR

FD-249 (Rev. 5-15-17) 1110-0046

STATE USAGE

LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX

SIGNATURE OF PERSON FINGERPRINTED

SOCIAL SECURITY NO.

LEAVE BLANK

ALIASES/MAIDEN

LAST NAME, FIRST NAME, MIDDLE NAME, SUFFIX

UNIVERSAL CONTROL NO.

STATE IDENTIFICATION NO.

DATE OF BIRTH MM DD YY

SEX

RACE

HEIGHT

WEIGHT

EYES

HAIR

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

**FEDERAL BUREAU OF INVESTIGATION, UNITED STATES DEPARTMENT OF JUSTICE
CRIMINAL JUSTICE INFORMATION SERVICES DIVISION, CLARKSBURG, WV 26306**

The FBI's acquisition, preservation, and exchange of identification information is generally authorized under 28 USC 534. This FD-249 is to be used for criminal justice purposes, such as incident to arrests and incarcerations. The Applicant form (FD-258) contains applicable Paperwork Reduction Act and Privacy Act notices and should be used for noncriminal justice purposes. "A Social Security Account Number (SSAN) is helpful to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), any Federal, State, or local government agency which requests an individual to disclose his/her SSAN is responsible for informing the person whether disclosure is mandatory or voluntary, by what statutory or other authority the SSAN is solicited, and what uses will be made of it."

JUVENILE FINGERPRINT SUBMISSION YES <input type="checkbox"/> TREAT AS ADULT YES <input type="checkbox"/>		DATE OF ARREST MM DD YY		ORI LIMMIL DEFENSE TRUST INVESTMENTS ORI81000025J CONTRIBUTOR 6421 N FLORIDA AVENUE STA D1231, TAMPA FL 33604 T: 888-666-1212 F: 888-666-1015 ADDRESS ATTN: EXEC VICE PRESIDENT - CORPORATE SECURITY REPLY YES <input checked="" type="checkbox"/> IF BUSY-FORWARD TO ANDREW.BAKER@JUDICIARY.UK DESIRED? <input type="checkbox"/> EMERGENCY 877-4FPS-411 USPSOIG 800-342-8347	
SEND COPY TO: SELF ORI81000025J (ENTER ORI) F.D.L.E HQ - FL0370400 GA MACON USAO - GA011017A INTPOL-DCINTER00/DCFPSOOOO		DATE OF OFFENSE MM DD YY		PLACE OF BIRTH (STATE OR COUNTRY) COUNTRY OF CITIZENSHIP	
MISCELLANEOUS NUMBERS		SCARS, MARKS, TATTOOS, AND AMPUTATIONS			
		RESIDENCE/COMPLETE ADDRESS		CITY	STATE
OFFICIAL TAKING FINGERPRINTS (NAME OR NUMBER) #9998 USPSOIG L.D.T.I. EVP CORP SECURITY CO-OWNER TAURUSUSA-WALTHER		LOCAL IDENTIFICATION/REFERENCE ORI 81000025 J - LIM-MIL DEFENSE TRUST INVESTMENTS / G7 FDLE 42437 LIM JR / JEREMIAH KRISTOPH - STATE OFFICER 260681 26TH NYCPD - CUNY PD STATEN ISLE OFCR LIM / J		PHOTO AVAILABLE? YES <input type="checkbox"/> PALM PRINTS TAKEN? YES <input type="checkbox"/>	
EMPLOYER: IF U.S. GOVERNMENT, INDICATE SPECIFIC AGENCY. IF MILITARY, LIST BRANCH OF SERVICE AND SERIAL NO.			OCCUPATION		
CHARGE/CITATION 1.			DISPOSITION 1.		
2.			2.		
3.			3.		
ADDITIONAL			ADDITIONAL		
ADDITIONAL INFORMATION/BASIS FOR CAUTION			STATE BUREAU STAMP		