

REMINDER FROM THE _____ POLICE/SHERIFF'S DEPARTMENT
LEVEL 3 SEX OFFENDERS & SEXUAL PREDEATORS MUST PERSONALLY
VERIFY THEIR ADDRESS TO LOCAL POLICE EVERY 90 DAYS.

NAME:		TODAY'S DATE:
CURRENT ADDRESS:		D/R NO.
NEXT CHECK-IN: (90 DAYS AFTER TODAY)	OFFICER NAME/BADGE NO.	
SIGNATURE OF SUBJECT:		DATE:

OFFENDER –SIGN AND DATE IN THE DOTTED BOXES ABOVE.

CHANGE OF ADDRESS? IF YOU CHANGE YOUR ADDRESS, YOU MUST NOTIFY THE SEX OFFENDER REGISTRY WITHIN 10 DAYS. YOU CAN FILE AN ADDRESS CHANGE AT THE _____ POLICE/SHERIFF'S DEPARTMENT AND WE WILL NOTIFY THE REGISTRY, OR YOU MAY NOTIFY THE REGISTRY YOURSELF.

PENALTIES? IF YOU FAIL TO OBEY ANY OF THE REGISTRATION REQUIREMENTS YOU COULD BE ARRESTED FOR A FELONY.

OTHER QUESTIONS? CALL _____ POLICE/SHERIFF AT _____ OR THE NEW YORK STATE SEX OFFENDER REGISTRY AT 518-457-3167

ORIGINAL - OFFENDER

YELLOW – PD/SO REPORT

PINK – SGT/CID/ADMIN OFFICE

Provided by the New York State Association of Chiefs of Police, Inc.

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