

**5.7.1 SAMPLE REQUEST FOR CRIMINAL OFFENDER INFORMATION**

**REQUEST FOR OREGON CRIMINAL HISTORY INFORMATION  
ORS 181.555 AND ORS 181.560**

**INSTRUCTIONS:** Please complete this form (or substantial copy) when requesting criminal history information. Mail request with \$10.00 check or money order payable to the: **OREGON STATE POLICE**

**DIRECT PAYMENT CUSTOMERS**

Oregon State Police  
Unit 11  
PO Box 4395  
Portland, Oregon 97208-4395

NOTE: The requested record information is furnished solely on the basis of name and/or description similarity with the subject of your inquiry. In the event a reportable record is found, subject will be advised of inquiry.

**SUBJECT INFORMATION:** All information is **REQUIRED**. Failure to supply complete information may effect results of inquiry.

(FOR OSP USE ONLY)

Please **TYPE** or **PRINT CLEARLY**

Name: \_\_\_\_\_  
Last First Middle Name

Alias/Maiden: \_\_\_\_\_

Date of Birth \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
If unknown, approx. age \_\_\_\_\_ (if known)

Current or Last Known Address \_\_\_\_\_  
Street or PO Box  
\_\_\_\_\_  
City State Zip

**REQUESTOR INFORMATION:**

\*If information is sought for employment purposes, please check one:

Applicant has been advised of this request: **In Person** \_\_\_\_\_ **By phone or letter** \_\_\_\_\_

\_\_\_\_\_ Check or money order enclosed (\$10.00 per request, please submit one check for multiple requests)

**REQUESTOR'S NAME AND RETURN ADDRESS**  
(please PRINT or Type)

**Phone No.** ( ) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_