

**REQUEST FOR COPY OF AIDED RECORD**

PD 304-161 (Rev. 09-06)

DO NOT DETACH - SUBMIT IN DUPLICATE

FOR EACH RECORD REQUESTED, A SEPARATE APPLICATION IS REQUIRED
 A SEARCH AND SERVICE FEE OF **\$10.00** MUST ACCOMPANY EACH APPLICATION.
DO NOT SEND CASH

FOR POLICE DEPT. USE ONLY

AIDED REPORT
 (PD 304-152B)

NAME AND ADDRESS OF PERSON TO WHOM
 RECORD IS TO BE MAILED SHALL BE PRINTED
 OR TYPED IN THIS SPACE BY APPLICANT

INSTRUCTIONS FOR MAIL-IN REQUESTS

1. Information **MUST** be typed or printed. Incomplete information may result in the return of your application
2. Include check or money order for **\$10.00** payable to NYC Police Department. THIS FEE IS NOT REFUNDABLE. **DO NOT SEND CASH**
3. Enclose a stamped, self-addressed 9½"x4" envelope.
4. Mail Request for **AIDED REPORT (PD 304-152B)** to:

New York City Police Department
 Criminal Records Section (Aided Unit)
 1 Police Plaza, Room 300
 New York, NY 10038

**** MAIL-IN REQUESTS ONLY ****

**NOTE: Sections 1 and 3 MUST be completed in all cases or your request will be returned.
 Completion of the additional sections will help to insure a thorough search.**

1. Date of Occurrence	2. Name of Injured (Include Year of Birth and Sex)		
3. Place of Occurrence (Include Nearest Intersecting Street)		4. Precinct of Occurrence	5. Aided Report No.
6. Aided Information Reported To:	Rank	Name	Shield No. Precinct