BOLINGBROOK POLICE DEPARTMENT
LOST LICENSE PLATE, DRIVER'S LICENSE, STICKER INFORMATION FORM

REPORTING AGENCY	SUPPLEMENTAL REPORTS	PAGE NO.	INCIDENT REPORT NO.
IL0990200		**1 OF 1**	**OT**

	DATE OCCURRED	DATE THIS REPORT	STATUS
			09

ITEM LOST

☐ **DRIVER'S LICENSE** ☐ **LICENSE PLATE** ☐ **REGISTRATION STICKER** ☐ **VILLAGE STICKER**

LOCATION OF LOSS

NAME	DATE OF BIRTH
ADDRESS	TELEPHONE
DRIVER'S LICENSE NO.	DRIVER'S LICENSE STATE

REGISTRATION NUMBER	REGISTRATION STATE	EXPIRATION DATE	LOCATION
			☐ **FRONT PLATE** ☐ **REAR PLATE**

☐ **1 OF 1** ☐ **1 OF 2** ☐ **2 OF 2**

REGISTRATION VALIDATION STICKER NO.	VILLAGE STICKER NO.

LEADS NO.	DATE ENTERED INTO LEADS

MISCELLANEOUS INFORMATION

OFFICERS AT SCENE – REPORTING OFFICER FIRST			
COPY TO	OTHER AGENCIES INVOLVED	APPROVED	DATE

OT