

ANNE ARUNDEL COUNTY POLICE DEPARTMENT
SEXUAL OFFENDER REGISTRATION REFERRAL

Incident # _____

Date: _____ Time: _____ Location: _____

Reason for Referral: No Booking Officer on Duty Booking Equipment not working
 Other _____

Name: _____

Address: _____

Sex: _____ Race: _____ Date of Birth: _____

Phone (home): _____ Phone (work): _____

To Registrant:

Due to extenuating circumstances, we are unable to process your registration at this time. You can register immediately at the following location see below or return at this District after: _____ date/time to complete your registration requirement.

IMPORTANT: Completion of this form DOES NOT fulfill your registration requirement.

A REGISTRATION IS STILL REQUIRED WITHIN THE NEXT 48 HOURS OF THIS DATE.

(Signature of Registrant)

Referred to for immediate registration at (check one):

- Northern District, 939 Hammonds Lane Baltimore, MD 21225 410-222-6135
- Eastern District, 3700 Mountain Road Pasadena, MD 21122, 410-222-6145
- Southern District, 35 Stepneys Lane Edgewater, MD 21037 410-222-1960
- Western District, 8273 Telegraph Road, Odenton, MD 21113, 410-222-6155

Reporting Person/ID#

Supervisor/ID#

Sex Offender Compliance Squad