

New York State Intelligence Center
[REDACTED]
Latham, New York 12110



Main: [REDACTED]
FAX: [REDACTED]
Toll-free: [REDACTED]

REQUEST FOR INFORMATION FORM

DATE & TIME OF REQUEST		MEMBER/ANALYST ASSIGNED	
RICS Control #: _____		Rank: _____	
Received/Entered By: _____		Last Name: _____	
Date: _____	Time: _____	Tax / SS#: _____	
REQUESTOR'S INFORMATION			
Agency Name and ORI: _____		Command/Unit: _____	Investigation Type: _____
Workplace (Full Address): _____		Child Exploitation	
Last Name: _____		First Name: _____	Rank/Title: _____
Tax # NYPD Only: _____		SSN: _____	Date of Appointment: _____
Office #: _____		Fax #: _____	Pager/Cell#: _____
TZS/Pct. Of Occ.: _____		Compl#: _____	Case#: 2017-212
Supervisor's Rank/Full Name: LT _____		Conferred w/ Requestor Date: _____	
		Time: _____	
		Phone Number: _____	
SUBJECT INFORMATION			
Last Name: Maxwell		First Name: Ghislaine	Middle: N
Aliases: _____			
DOB: [REDACTED]		Age: 57	Sex: F
Race: W		POB: [REDACTED]	Gang Name: _____
Bldg# _____		Street: _____	Apt: _____
City: _____			
State: _____		ZIP Code: _____	Tel# _____
SSN# _____			
Driver License#: [REDACTED]		State/Country: FL	Arrest: _____
FBI#: _____		NYSID#: _____	Other State SID#: _____
BUSINESS LOCATION & FINANCIAL INFORMATION			
Business Name: _____		Bldg: _____	Street: _____
City: _____		State: _____	Zip Code _____
Tel#: _____			
Last Name: _____		First Name: _____	(Circle One) Owner/Mgr/Employee
Tax ID#: _____		Financial Institution: _____	Account Type: _____
VEHICLE INFORMATION			
Plate #: _____		State/Country: _____	Year: _____
Make: _____		Model: _____	
No. Doors/Body Style: _____		Color: _____	Gray _____
VIN#: _____			
REMARKS			
What have you (Requestor) done?			
What needs to be done by NYSIC personnel?			
I am requesting a CIAS search of the above named female for the past one year.			
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EMAIL Request to NYSIC: [REDACTED] OR			
FAX Request to NYSIC: [REDACTED] (You MUST call [REDACTED] to verify that your FAX was received!)			