



**BCI CORRECTION FORM FOR COURTS**

**Please add/delete/modify the following disposition:**

Date:

Submitting court:

**INFORMATION INITIALLY SUBMITTED & ON CCH:**

ITN Number \_\_\_\_\_

Name \_\_\_\_\_

DOB & SSN \_\_\_\_\_

DOA \_\_\_\_\_

CHARGE \_\_\_\_\_

Disposition \_\_\_\_\_

**CHANGES TO BE MADE TO WHAT WAS ORIGINALLY SUBMITTED OR ON CCH:**

Additional conviction/dismissal(s):

Delete conviction/dismissal(s):

Modify conviction/dismissal(s) or case number(s):

Report a vacate order:

Report a duplicate ITN number:

Prosecutor declined/did not file charges:

Submitted by:

Phone # \_\_\_\_\_

Fax # \_\_\_\_\_

E-mail address \_\_\_\_\_