UNIDENTIFIED PERSON WORKSHEET

Wisconsin Department of Justice
DJ-LE-278A (Rev 1/06)

UNIDENTIFIED CATEGORY

- ☐ Unidentified Deceased Person
- ☐ Disaster Victim
- ☐ Unidentified Living Person

ENTER NCIC AGENCY IDENTIFIER WI

*Agency Case Number										Notify Originating Agency (Circle One) Yes No				
*Body Parts Status (Deceased & Disaster Victim Only)														
*Sex		*Race				*Date Body/Person Found				*Estimated Year of Birth (Range) —				
Estimated Date of Death				*Approximate Height (Range) —						*Approximate Weight (Range) —				
*Eye Color	*Hair Color	Scar/Mark/Tattoo		*Fingerprint Classification										
Blood Type	Circumcision	Footprints	*Body X-Rays	Corrective Vision Prescription										
*Manner of Death	Cause of Death													
Jewelry	Type													
Jewelry Description														
Coroner Agency Name and Case Number						Coroner Locality								
Coroner Telephone Number		DNA Available (Circle One) Yes No				DNA Location								
Linking Agency Identifier						Linking Agency Case Number								
Miscellaneous Remarks														
*Operator						NCIC Number								

CANCEL NCIC AGENCY IDENTIFIER WI

*NCIC Number	*Agency Case Number
Reason for Record Removal	*Operator

Completed by:	Name	Verification	Date	Reason
Enter				
Modify				
Cancel				
Enter Supp.				
Cancel Supp.				

MODIFY NCIC AGENCY IDENTIFIER WI

*NCIC Number	*Agency Case Number		
Body Parts Status	Agency Case Number	Sex	Race
Date Body/Person Found	Estimated Year of Birth (Range)	Estimated Date of Death	Approximate Height (Range)
Approximate Weight (Range)	Eye Color	Hair Color	Scar/Mark/Tattoo
Fingerprint Classification	Blood Type	Circumcision	Footprints / Body X-Rays
Corrective Vision Prescription			
Manner of Death	Cause of Death		
Jewelry / Type			
Jewelry Description			
Coroner Agency Name and Case Number			
Coroner Locality	Coroner Telephone Number		
Notify Originating Agency Yes No	DNA Available Yes No	DNA Location	
Linking Agency Identifier	Linking Agency Case Number		
Miscellaneous Remarks			
Name of Validator	*Operator		

ENTER SUPPLEMENTAL NCIC AGENCY IDENTIFIER WI

*NCIC Number			*Agency Case Number			*Operator		
*Supplemental	Scarmarks							

CANCEL SUPPLEMENTAL NCIC AGENCY IDENTIFIER WI

*System Identification Number			*Agency Case Number			*Operator		
*Supplemental	Scarmarks							