



DAVE YOST
OHIO ATTORNEY GENERAL

CCH Arrest Data Request

The Bureau of Criminal Identification (BCI) can provide county-specific lists of arrests on record for which no dispositions have yet been reported pursuant to Ohio Revised Code 109.57. Each list contains sufficient information about each defendant or juvenile to allow your agency to research the missing disposition. If you would like a list for the county or counties served by your court, please email a completed CCH Arrest Data Request form to DispositionGrants@OhioAGO.gov.

NOTE: The records you will receive contain Criminal History Record Information (CHRI) that can be used only for official purposes and must be handled in accordance with [CJIS Security Policy v5.9.3 2023-09-14 — LE \(fbi.gov\)](#).

ORGANIZATION INFORMATION

Name of entity: _____

Address: _____

City: _____ ZIP: _____ County: _____

Phone number: _____

HEAD OF ORGANIZATION

Name: _____

Title: _____

Phone number: _____ Email address: _____

AUTHORIZED RECIPIENT (if different from above)

Name: _____

Title: _____

Phone number: _____ Email address: _____

I understand that the information I am requesting contains Criminal History Record Information (CHRI) as well as personal identifiable information (PII) that includes but is not limited to offender names, dates of birth, Social Security numbers, dates of arrests, and the offenses for which the offenders were arrested.

I understand that Title 28, Part 20, Code of Federal Regulations, as well as the Criminal Justice Information Services (CJIS) Security Policy impose specific restrictions on the possession, storage, use, access, and dissemination of this information.

I am requesting the information in my official capacity as a representative of a criminal justice agency that routinely handles Criminal Record History Information and understand it can be used only for valid criminal justice purposes. The information I am requesting will be used to identify and report dispositions for arrests that previously occurred in my jurisdiction, and I will properly destroy the file I receive from BCI once it has no further administrative value to my agency.

By requesting these records I am affirming that my agency understands and complies with current CJIS requirements for the possession, storage, use, access, and dissemination of Criminal History Record Information (CHRI) found at [CJIS Security Policy v5.9.3 2023-09-14 — LE \(fbi.gov\)](#).

SIGNED:

HEAD OF ORGANIZATION

DATE

AUTHORIZED RECIPIENT

(if different than Head of Organization)

DATE