



## Stonington Police Department

173 South Broad Street | Pawcatuck, CT 06379

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Jay DelGrosso | Chief of Police

Subject's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I am requesting a copy of a CRIMINAL record for the above named individual as of this date. I understand that this record is from the Stonington Police Department ONLY and that other police criminal records could exist in other jurisdictions.

Name of Requestor: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Company Name (if applicable) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The information provided at this time is based upon current information. This information may change in the future based on further court action.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

173 South Broad Street  
Pawcatuck, CT 06379  
Records 860-599-7511  
Records fax 860-599-7522