

(Rev. 05-01-2008)

~~SECRET~~

FEDERAL BUREAU OF INVESTIGATION

Precedence: ROUTINE

Date: 01/26/2010

To: Sacramento

Attn:

IA

IA

From: Sacramento

[redacted] Fresno RA

Contact: SA [redacted]

Approved By: [redacted]

Drafted By: [redacted]

Case ID #: (U) 806H-SC-C43015 [redacted] (Pending)

Title: (U) [redacted]

Synopsis: (U) [redacted]

Derived From: FBI NSISCG-20080301

Declassify On: 20200126

Administrative: (U) [redacted] A/ASAC [redacted] on [redacted]

Enclosure(s): (U) California Department of Motor Vehicles printout and driver's license photo.

Details: (U) On Monday, 01/25/2010, SA [redacted] IA [redacted]

Personal Information

(U) [redacted]

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26 JAN 02, 5:00 PM UPLOADED -4

~~SECRET~~

To: Sacramento From: Sacramento
Re: (U) 806H-SC-C43015- [redacted] 01/26/2010

b7E

(U) [redacted]
[redacted]

[redacted] population

(U) [redacted]
[redacted]
[redacted]

b7E

(U) [redacted]
[redacted]
[redacted]

(U) [redacted]
[redacted]

b7E

(U) [redacted]
[redacted]

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To: Sacramento From: Sacramento
Re: (U) 806H-SC-C43015- 01/26/2010

b7E

Descriptive Data:

(U) Reference

Name -

Last:

First:

Middle:

Race:

Sex:

DOB:

POB:

DLN:

SOC:

Address(es) -

House #:

Pre Direction:

Street Name:

Street Suffix:

Unit:

City:

State:

Postal Code:

Country:

Phone #:

b6
b7C

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To: Sacramento From: Sacramento
Re: (U) 806H-SC-C43015 01/26/2010

b7E

LEAD(s) :

Set Lead 1: (Action)

SACRAMENTO

AT FRESNO, CA

(U) Read and clear.

Set Lead 2: (Info)

SACRAMENTO

AT SACRAMENTO, CA

(U) Read and clear.

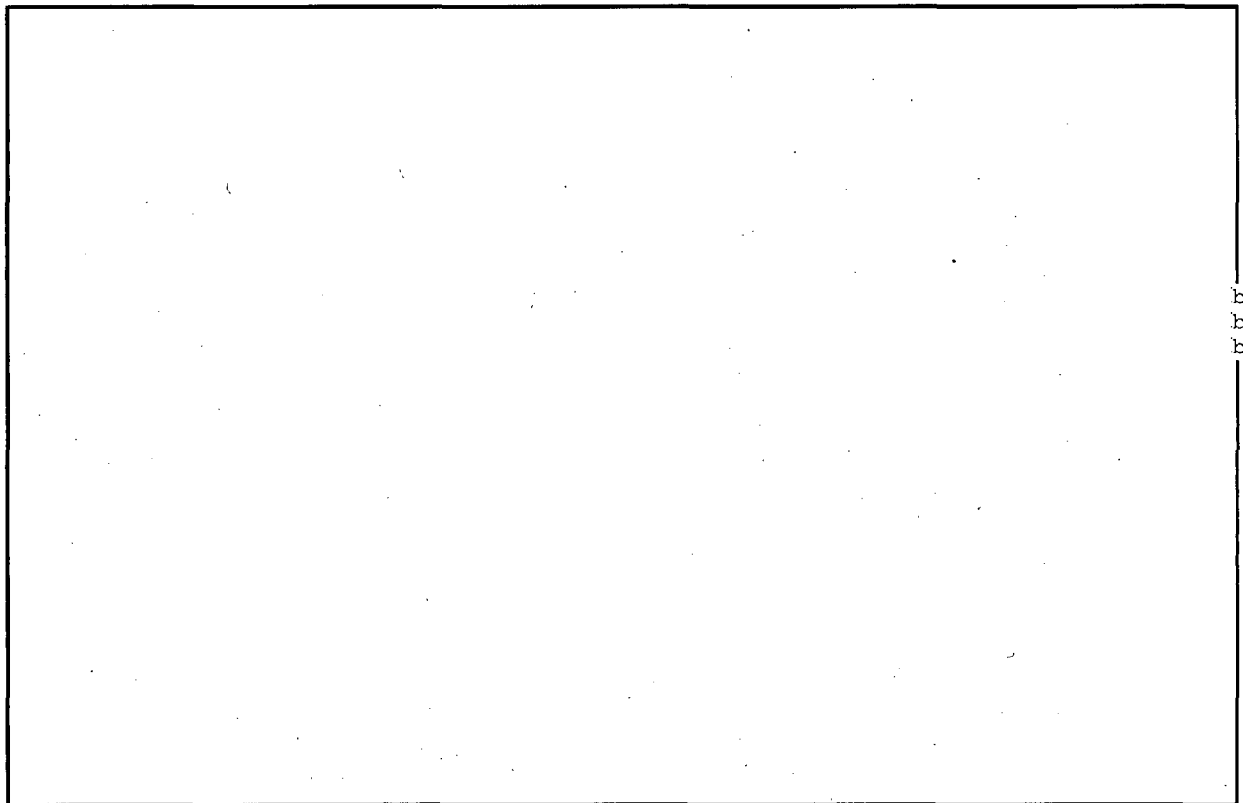
♦♦

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CALIFORNIA DEPARTMENT OF MOTOR VEHICLES
IMAGE RECORD FOR:

	EXPIRES:	CLASS:	SEX:
HAIR:	EYES:	HEIGHT:	WEIGHT:
DATE OF BIRTH:			
ADDRESS:			
PHOTO DATE:	PHOTO OFFICE:	APPLICATION DATE:	APPLICATION OFFICE:
ISSUE DATE: N/A	ISSUE OFFICE: N/A	RESTRICTIONS:	

b6
b7c



b6
b7c
b7E

Date: _____ /s/ _____

b7E

1/28/2010

1/28/2010 11:40:50

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 05-04-2011 BY 65179 DMH /LSG

Requestor: [REDACTED]

Date/time: 1/28/2010 11:39:17 AM

Request : Drivers License Check /DMV/NLE

Info : STA1:CA NAM [REDACTED] SEX [REDACTED] DOB [REDACTED] CTY: [REDACTED]

DMV DL BY NAME

IN

DATE:01-28-10*TIME:11:39*

MATCHED ON [REDACTED]

DMV RECORD FOR LAW ENFORCEMENT USE ONLY

DL/NO [REDACTED] B/D [REDACTED] NAME [REDACTED]

MAIL ADDR AS OF [REDACTED]

RES/ADDR [REDACTED]

OTH/ADDR AS OF [REDACTED]

IDENTIFYING INFORMATION:

SEX [REDACTED] HAIR [REDACTED] EYES [REDACTED] HT [REDACTED] WT [REDACTED]

LIC/ISS [REDACTED] EXPIRES [REDACTED] RBM [REDACTED]

ENDORSEMENTS:NONE*

LATEST APP: [REDACTED]

DL TYPE: [REDACTED] ISS/DATE [REDACTED] OFFICE [REDACTED]

ORGAN AND TISSUE DONOR: NO UPDATED:11-16-09

LICENSE STATUS:

VALID*

DEPARTMENTAL ACTIONS:

NONE

CONVICTIONS:

NONE

FAILURES TO APPEAR:

NONE

ACCIDENTS:

NONE

END

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b7E