



CRIMINAL RECORD CHECK
AUTHORIZATION

TO: Sampson County Clerk of Courts
Courier Box #11-32-07
Clinton, NC 28328

FROM: Raymond Spell, Director

DATE: _____

RE: Criminal record check on the following:

Please complete the requested record check and return in the enclosed self-addressed stamped envelope.

Full Name: _____
Women include maiden and all married names

Date of Birth: _____ / _____ / _____
Month Day Year

Social Security Number: _____ - _____ - _____

Driver's License Number: _____

Current Residence Address: _____

Previous Residence Address: _____

Applicant's Signature _____

P.O. Box 140 Clinton, NC 28329 * 910-299-0925 * scpr@sampsonnc.com