



Sex Offender



# Sex Offender Records

LEADS Number Identifier now begins with 'X'

**Example: X21A0040**



# Sex Offender Query

## QVEHPER QUERY FORM

QVEHPER - Vehicle & Person Query Form

**\* Message Key**      **ORI**  
Z2 = Basic Query      IL08496Y6 = ISP INFO SERVICES BUREAU SPRINGFIELD

**LEADS or NCIC**  
Notes      LEADS #      NCIC #      Placard SER#

**LICENSE PLATE**  
License #      License State/Region      License Year      License Type

**PERSONAL**  
Name      Sex      Race      Date of Birth  
Social Security #      Miscellaneous #      Driver Image      Hotfiles Image      Related Search Hit  
Driver License #      Driver License State/Region Code  
State ID #      FBI / UCN #      FOID #

**VEHICLE**  
VIN #      OAN #      Vehicle Year      Vehicle Make

Submit      Clear      Close



# SEX OFFENDER ENTRY



## FORMSTREE

Mailbox for LANTERP - Inbox  
Message Quick Queries Sort Messages

LANTERP's Folders

- Inbox
- Sent
- Save
- Trash
- Drafts
- Search

GENERAL QUERY  
NLETS QUERY  
CHRI QUERIES  
HIT CONFIRMATION AND RESPONSES  
LEADS and NCIC CHF

PERSONS

- Wanted Person
- Missing Person
- Gang Member
- Identity Theft
- Protection Order
- Sex Offender
  - Query
  - Enter
  - Enter Supplemental
  - Modify
  - Clear
  - Cancel
  - Cancel Supplemental
  - Enter Student/Employment Address
  - Modify Student/Employment Address
  - Cancel Student/Employment Address
- Violent Person
- Field Notification
- Unidentified Person

PROPERTY

## QUICK BAR FUNCTION

PERSONS

- Wanted Person
- Missing Person
- Gang Member
- Identity Theft
- Protection Order
- Sex Offender
  - Query
  - Enter
  - Enter Supplemental
  - Modify
  - Clear
  - Cancel
  - Cancel Supplemental
  - Enter Student/Employment Address
  - Modify Student/Employment Address
  - Cancel Student/Employment Address
- Violent Person
- Field Notification
- Unidentified Person

PROPERTY

ADD-ON

IMAGE

TITLE HIT

OTHER

ADMINISTRATIVE MESSAGES

Links

EXS

Mailbox for LANTERP - In

EXS - Enter Sex Offender

Header Information

\* Message Key

EXS = Sexual Offender Entry

Offender Personal Information



# Sex Offender Entry

## \* Message Key

EXS = Sexual Offender Entry

EXS = Sexual Offender Entry

EXSC = Sexual Offender Entry Caution

EXS1 = Violent Offender Against Youth or Murderer - LEADS ONLY

EXS1C = Violent Offender Against Youth CAUTION - LEADS Only



# Message Key – EXS

**EXS - Enter Sex Offender**

**Header Information**

\* Message Key      ORI  
EXS = Sexual Offender Entry      IL08496Y6 = ISP INFO SERVICES BUREAU SPRINGFIELD

**Offender Personal Information**

Cautious/Medical Condition

\* Name      \* Sex      \* Race      \* Date of Birth      Place of Birth

\* Height      \* Weight      \* Hair Color      \* Eye Color      Skin Tone      Scars, Marks, Tattoos

Ethnicity      Citizenship      Social Security #      FBI /UCN#      Miscellaneous #      Fingerprint Classificat

DNA      DNA Location      Blood Type      Chicago PD IR#

Telephone #      Telephone Type      Email      Internet Identifiers

Operator's License State      Operator's License #      Expiration Year



# Message Key - EXSC

EXS - Enter Sex Offender

Header Information

\* Message Key      ORI

EXSC = Sexual Offender Entry Caution      IL08496Y6 = ISP INFO SERVICES BUREAU SPRINGFIELD  
IL0680200 = PD LITCHFIELD IL

Offender Personal Information

\* Caut<sup>o</sup>n/Medical Condition

\* Name      \* Sex      \* Race      \* Date of Birth      Place of Birth

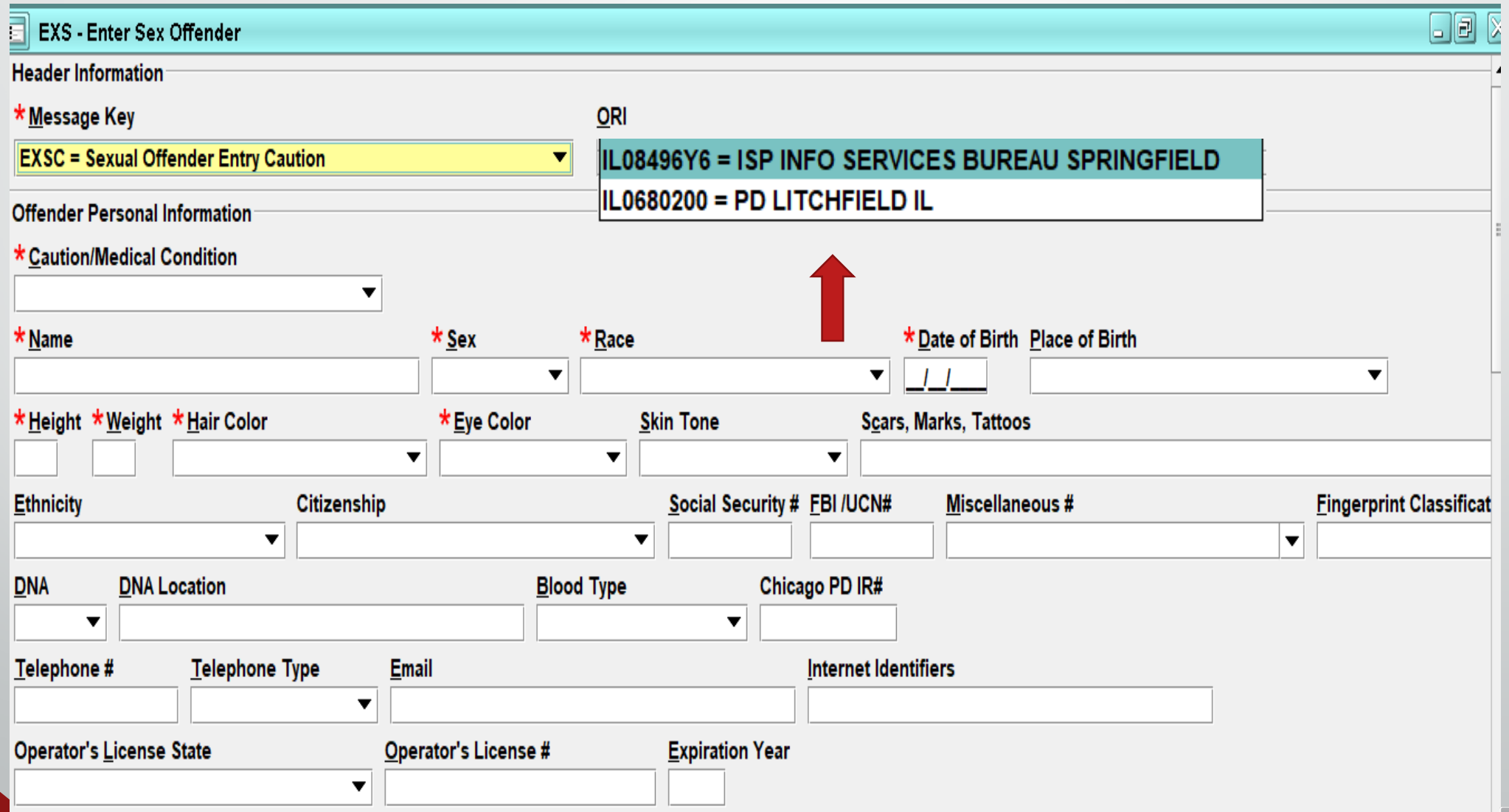
\* Height      \* Weight      \* Hair Color      \* Eye Color      Skin Tone      Scars, Marks, Tattoos

Ethnicity      Citizenship      Social Security #      FBI /UCN#      Miscellaneous #      Fingerprint Classificat<sup>o</sup>n

DNA      DNA Location      Blood Type      Chicago PD IR#

Telephone #      Telephone Type      Email      Internet Identifiers

Operator's License State      Operator's License #      Expiration Year





# Offender Personal Information

## Caution/Medical Condition (CMC)

Will be highlighted if required,  
dependent upon  
Message Key Selection

DESCRIPTION	CODE
Armed and dangerous	00
Other (Identify in the MIS Field)	01
Violent tendencies	05
Martial arts expert	10
Explosive expertise	15
Known to abuse drugs	20
Escape risk	25
Sexually violent predator-Contact ORI	30
International Flight Risk	40
Heart condition	50
Alcoholic	55
Allergies	60
Epilepsy	65
Suicidal	70
Medication required	80
Hemophiliac	85
Diabetic	90



# ORI

Each station has it's own ORI.

Sub ORI or the main ORI for each agency. If your agency enters Hot Files for other Agencies, you will have a drop down box that will allow you to choose which ORI you would like to use for the particular Entry or Inquiry.

CDC's will still identify stations.

**IL08496Y6 = ISP INFO SERVICES BUREAU SPRINGFIELD**

**IL0680200 = PD LITCHFIELD IL**



# OFFENDER PERSONAL INFORMATION

## Offender Personal Information

Caution/Medical Condition

\* Name

\* Sex

\* Date of Birth

Place of Birth

\* Height \* Weight \* Hair Color

Complexion

Skin Tone

Scars

Tattoos

Ethnicity

City

Social Security #

FBI /UCN#

House #

Fingerprint Classification

DNA

DNA Location

Blood Type

Chicago PD IR#

Telephone #

Telephone Type

Email

Internet Identif

Operator's License State

Operator's License #

Expiration Year

DNA

\* DNA Location



# Offender Registration Information

## Offender Registration Information

\* LEADS Status \* Initial Registration Date \* Activity Date

State ID # \* Child Sex Offender

\* County/State of Conv \* Photo \* IDC # \* Age At Offense Verification Verified Action

\* Citation 1 \* Conviction 1 Citation 2 Conviction 2 Citation 3 Conviction 3 Citation 4 Conviction 4 Citation 5 Conviction 5

Citation 6 Conviction 6 Citation 7 Conviction 7 Citation 8 Conviction 8 Citation 9 Conviction 9 Citation 10 Conviction 10



## OFFENDER LEADS STATUS Hover

- **D-Notified, Not Registered-(applies proper caveat, Offender has 3 days to register, M/VOAY Offender has 5 days to register)**
- **E-Child Sex Offender who no longer needs to register**
- **I-Incarcerated**
- **K-Deported**
- **M-*nnn*-Moving to Illinois County..*nnn* must be numeric County Code from Table**
- **N-Not Notified; to be Notified**
- **OM-Out of State Move**
- **R-Registered**
- **X-Sex Offender with an adult victim who no longer needs to Register (1-5 alpha,num)**

## CSO CODES Dropdown

**D = Sexually dangerous person - victim under 18**

**J = Juvenile sex offender - victim under 18**

**K = Juvenile sex offender - victim 18 or older**

**M = Murderer - sexually motivated**

**N = Sex Offender Victim 18 or Older**

**P = Sexual Predator - victim under 18**

**S = Sexual Predator - victim 18 or older**

**U = Adjudicated Juvenile/Violent Offender**

**V = Sexually violent person - victim under 18**

**W = VOAY and/or Murder - not Sexually motivated**

**X = Sexually violent person - victim 18 or older**

**Y = Child Sex Offender Less Than 18**

**Z = Sexually dangerous person - victim 18 or older**

# Victim Information

- Relationship to Victim – dropdown
- Victim Age – must be 2 characters (*at time of violation*).
- Victim Gender

## Victim Information

Relationship to Victim

\* Victim Age

Victim Gender



# Relationship to Victim

Code List Search

Enter Search Text

Only Search From **WITHIN FAMILY**

- Victim was Child
- Victim was Common-Law Spouse
- Victim was Grandchild
- Victim was Grandparent
- Victim was In-Law
- Victim was Other Family Member
- Victim was Parent
- Victim was Sibling
- Victim was Spouse
- Victim was Stepchild
- Victim was Stepparent
- Victim was Stepsibling

Code List Search

Enter Search Text

Only Search From **OUTSIDE FAMILY BUT KNOWN TO VICTIM**

- Homosexual Relationship
- Victim was Acquaintance
- Victim was Babysittee (The Baby)
- Victim was Boyfriend/Girlfriend
- Victim was Child of Boyfriend or Girlfriend
- Victim was Employee
- Victim was Employer
- Victim was Ex-Spouse
- Victim was Friend
- Victim was Neighbor
- Victim was Otherwise Known

Code List Search

Enter Search Text

Only Search From **NOT KNOWN BY VICTIM**

- Relationship Unknown
- Victim was Stranger



# Offender Address Information

## Address Information

Address Type

\* Beginning Date Ending Date Verification Date

Homeless

\* Addr. Incarcerated

Known Associate

Mailing

\* City  Other

Relative

Residence (Last Known)

Temporary Lodging (NSOR Only)

Transient

\_\_\_/\_\_\_/\_\_\_

Area / Beat

\_\_\_

County Code

▼

\* Zip Code

\_\_\_

\* Residence Type

- AP = Apt/Condo/Duplex/Multipl
- JL = Jail or Other Law Enforcement
- LT = Licensed Transitonal Housing
- SH = Shelter
- HS = Single Family
- TR = Trailer Park
- UN = Unknown





# Offender Vehicle Information

## Vehicle Information

Vehicle Color  /  Vehicle Year  Vehicle Make  Vehicle Model

Vehicle Style  VIN #  Vehicle Ownership

License Month  License Year  License State  License #

## Boat Information

Boat Color  /  Boat Year  Boat Make

Boat Type  Boat Name  Boat Length  Pro

Boat Hull #  Registration #  Registration State

- A = Registered to Acquaintance
- F = Registered to Relative That Does not Share Residence
- H = Registered to Member of Household
- L = Loaner
- P = Personal
- R = Rental
- W = Work
- Y = Other (See Mis)

## Optional Linkage Information

Linkage Agency ID  Linkage Case #

## Miscellaneous Information

## Agency Case Number

Agency Case #

Submit

Clear



# Hot Links

Query	Modify	Clear	Cancel	Enter Emp/Stu Address	Modify Emp/Stu Address
Cancel Emp/Stu Address	Enter Supp	Cancel Supp	Enter AddOn	Clear Addon	Enter Image



CHF

\* DO NOT SEARCH, DETAIN OR ARREST BASED SOLELY ON THIS RECORD \*

\*\* SUBJECT IS A REGISTERED SEXUAL PREDATOR - VICTIM UNDER 18 \*\*

OFFENDER MUST REGISTER UNTIL 2031-04-13

LDS/X21A1769 SEX OFFENDER

CMC/30 SEXUALLY VIOLENT PREDATOR

NAM/GATES,PEARLY SEX/F RAC/W POB/IL

DOB/1964-01-30 AGE/57 HGT/506 WGT/180 HAI/BLN EYE/BLU

DNA/N

SID/IL111111

SMT/TAT L ANKL

ADD/01 RESIDENCE (LAST KNOWN) BDA/2021-04-13

SNU/123 SDI/N SNA/MAIN

CTY/ANYTOWN STA/IL COU/SANGAMON ZIP/62703 HTP/TRAILER PARK

ORI/IL08496Y6 ORA/ISP INFO SERVICES BUREAU SPRINGFIELD

ENT/BN0 OPR/LANTERP DTE/2021-04-13 14:02 DLU/2021-04-13 14:02 NIC/X750493261

CONFIRM WITH ORI

\* DO NOT SEARCH, DETAIN OR ARREST BASED SOLELY ON THIS RECORD \*

\* IF ACTUAL CONTACT: DOCUMENT LDS/X21A1769 WITH ADDON RECORD \*

\*\* REGISTERED OFFENDER INFORMATION \*\*

LSTA/R - REGISTERED

ORD/2021-04-13 ERD/2031-04-13 CON/2014-06-23

OFS/23 - COMPLIANT

LADT/2021-04-13 CSO/P

CCV/SANGAMON PHO/Y AOO/50 AOV/12 SOV/M

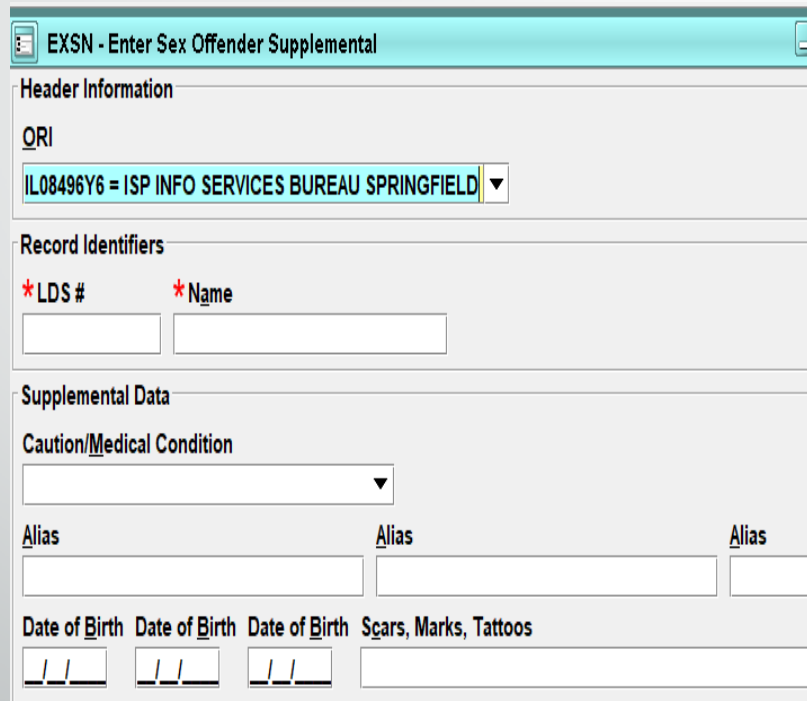
CON1/2014-06-23 CIT1/CRIMINAL SEXUAL ABUSE/FORCE

\*\*\*\*\* END OF SEX OFFENDER RECORD INFORMATION \*\*\*\*\*



# Enter Supplemental Data

## Select Form Tree Form



EXSN - Enter Sex Offender Supplemental

Header Information

ORI  
IL08496Y6 = ISP INFO SERVICES BUREAU SPRINGFIELD

Record Identifiers

\*LDS #      \*Name

Supplemental Data

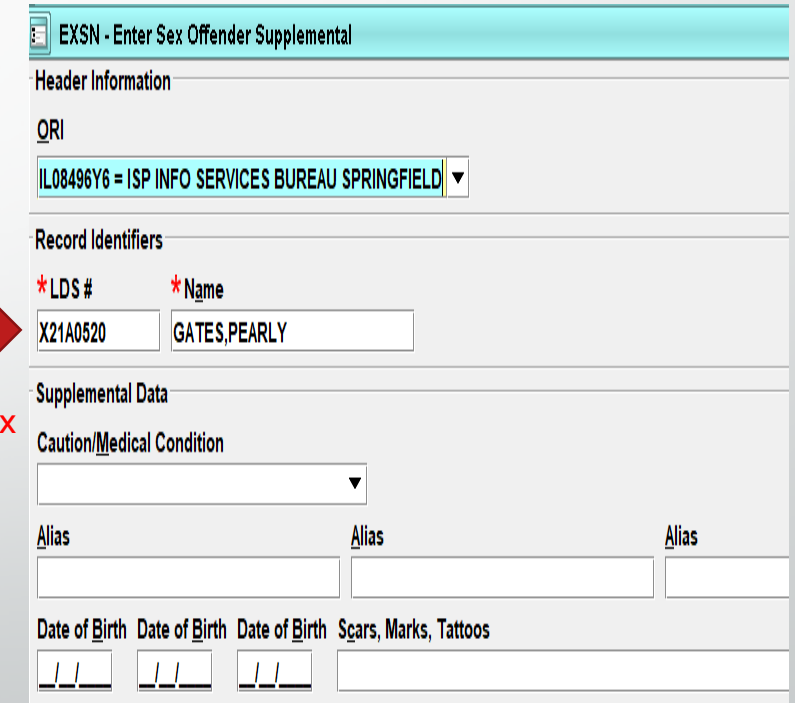
Caution/Medical Condition

Alias                      Alias                      Alias

Date of Birth   Date of Birth   Date of Birth   Scars, Marks, Tattoos



## Select Hot Link From Message



EXSN - Enter Sex Offender Supplemental

Header Information

ORI  
IL08496Y6 = ISP INFO SERVICES BUREAU SPRINGFIELD

Record Identifiers

\*LDS #      \*Name

X21A0520      GATES,PEARLY

Supplemental Data

Caution/Medical Condition

Alias                      Alias                      Alias

Date of Birth   Date of Birth   Date of Birth   Scars, Marks, Tattoos



Identifier X





# Take Possession of Record 2 step process - #1

**MXS - NCIC Modify Sex Offender**

**Header Information**

ORI  
IL08496Y6 = ISP INFO SERVICES BUREAU SPRINGFIELD ▼

**Record Identifiers**

* LEADS #	* Name
X21A0520	GATES,PEARLY

**Message Information**

<u>MKE</u>	<u>ORI</u>	Name of <u>Validator</u>
▼	INFO SERVICES BUREAU SPRINGFIELD ▼	



# Take Possession of Record Step #2

**MXS - NCIC Modify Sex Offender**

**Header Information**  
ORI  
IL08496Y6 = ISP INFO SERVICES BUREAU SPRINGFIELD

**Record Identifiers**  
\* LEADS #      \* Name  
X21A0520      GATES,PEARLY

**Message Information**  
MKE      ORI

**Offender Personal Information**  
Caution/Medical Condition  
Name      Sex      Race  
Height   Weight   Hair Color      Eye Color      Skin To  
Ethnicity      Citizenship  
DNA      DNA Location      Chic  
Telephone #      Telephone Type      Email  
Operator's License State      Operator's License #

**Offender Registration Information**  
LEADS Status   Initial Registration Date   Activity Date   Ending Registration Date  
R           02/22/2021  
State ID #      Child Sex Offender



# Step 2 continued

County/State of Conv	Photo	Age At Offense	Verification	Verified Action
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Citation 1	Conviction 1	Citation 2	Conviction 2	Citation 3	Conviction 3	Citation 4	Conviction 4	Citation 5	Conviction 5
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Citation 6	Conviction 6	Citation 7	Conviction 7	Citation 8	Conviction 8	Citation 9	Conviction 9	Citation 10	Conviction 10
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## Victim Information

Relationship to Victim	Victim Age	Victim Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>

## Address Information

Address Type	*Beginning Date	Ending Date	Verification Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Addr. No.	Direction	Apt. #	Street Name	Area/Beat #
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

City	State	County Code	Zip Code	Residence Type
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>





# SUPPLEMENTAL FORM

**EXSN - Enter Sex Offender Supplemental**

**Header Information**

ORI

**Record Identifiers**

\* LDS #      \* Name  
     

**Supplemental Data**

Caution/Medical Condition

Alias      Alias      Alias  
           

Date of Birth   Date of Birth   Date of Birth   Scars, Marks, Tattoos      Social Security #  
              

Miscellaneous #      Citizenship  
     

Telephone #      Telephone Type      Email      Internet Identifiers  
                 

State ID #

Relationship to Victim      Victim's Age      Victim's Gender  
           

Operator's License State      Operator's License #      Expiration Year

# SUPPLEMENTAL FORM

License Month	License Year	License State	License Type	License #	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Vehicle Color	Vehicle Year	Vehicle Make	Vehicle Model		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Vehicle Style	VIN #	Vehicle Ownership			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
Boat Color	Boat Year	Boat Make	Boat Model	Boat Type	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Boat Name	Boat Length	Propulsion	Hull	Hull Shape	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Boat Hull #	Registration #	Registration State	Reg Exp Year	Coast Guard #	Home Port
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Image #	Image Type				
<input type="text"/>	<input type="text"/>				

Submit

Clear

Close



# Enter Student/Employment Address

IBHE Website: [IBHE.org](http://IBHE.org)  
To check for Institution of Higher Education

EADDR - Enter Employment / Student Address

\* Message Key    
ORI  AU SPRINGFIELD

Record Identifiers  
EEEM = Enter Employment Address  
EEST = Enter Student Address


\* LEADS #  \* Name

Address Information

\* Employer/School Name  Inst. of Higher Education ?

Addr. No.  Direction  Apt. #  Street Name  Area/Beat

\* City  \* State  \* County  ZIP  Phone



# Modify Employment/Student Address

MADDR - Modify Employment / Student Address

\* Message Key

ORI

Address Record Identifiers

* LEADS #	* Name	* Rec #	* County
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Address Information

Employer/School Name

Addr. No.	Direction	Apt. #	Street Name	Street Suffix/Beat
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

City	State	County	ZIP	Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>





# Clear and Cancel new meanings

Cancel now = Clear

Void now = Cancel



# MODIFY TO DELETE FIELDS

**MXS - NCIC Modify Sex Offender**

**Header Information**

ORI

**Record Identifiers**

\* LEADS #   \* Name

**Message Information**

MKE   ORI   Name of Validator

**Offender Personal Information**

Caution/Medical Condition

Name

Height   Wei

Ethnicity   Citizenship   Social Security #   FBI /UCN#   Miscellaneous #   Fingerprint Classificat

DNA   DNA Location   Chicago PD IR#   Blood Type

Telephone #   Telephone Type   Email   Internet Identifiers

Must be a valid NCIC 2000-assigned code as listed in Personal Descriptors, NCIC 2000 Code Manual.  
Enter a # to delete this field (1 - 1 alpha)

CANCEL  
Employment/Student  
Address

XADDR - Cancel Employment / Student Address

\* Message Key

ORI

Address Record Identifiers

\* LEADS #  \* Name

\* County  \* Rec #

Submit Clear Close

