

2018 CCJWSA DIRECTORY
CORRECTION FORM

If your agency has any corrections, additions or updates for this directory, PLEASE complete this form and send it to the address listed below.

MAIL TO: **CCJWSA**
 PO Box 8237
 Woodland, CA 95776

Agency Name: _____

Page in directory: _____

County: _____

Mailing Address: (Includes street address if your mailing address is a P.O. Box)

City/State/Zip: _____

Phone Number: (police line 24 hour) _____

Fax Number: _____

Agency CLETS Mnemonic: _____

ORI Number: _____

Types of Warrants served: _____

Minimum Bail: _____

Will accept: Abstract _____ Teletype _____ Certified Copy or Fax _____ Other (specify) _____

Book at: _____

CLETS Mnemonic for Booking Facility (if different than your agency): _____

**WE WISH TO EXPRESS OUR APPRECIATION TO THE AGENCIES WHO
PROVIDED INFORMATION TO MAKE THIS PUBLICATION POSSIBLE.**