



DEPARTMENT OF PUBLIC SAFETY
Missing Persons Clearinghouse (MPCH) Report Form



MPCH Number: _____

Case Agency: _____ **Date:** _____

Date: _____ Time: _____ Call Taken By: _____

Caller's Name: _____
Last, First, Middle

Relationship to Missing: _____

Caller's Address: _____
Number, Street, Apartment Number

City, State, Zip Code

Home Phone: _____ Work Phone: _____

Missing Category: ☐ Non-Family Abduction ☐ Parental Abduction ☐ Runaway
☐ Adult (18 years old or over) ☐ Other – Explain Below: _____

NCIC Criteria: ☐ Disability ☐ Endangered ☐ Involuntary ☐ Juvenile
☐ Catastrophe Victim ☐ Caution Code

Missing Person's Name: _____
Last, First, Middle

Aliases: _____

Date Missing: _____ Time: _____ Race: _____ Sex: ☐ Male ☐ Female

Place of Birth: _____ Age: _____ DOB: _____ Hgt: _____ Wgt: _____

Eye Color: _____ Hair Color: _____ Complexion: _____

Scar/Marks/Tattoos: _____

Social Security Number: _____ OLN#: _____ OLN State: _____ OLN Year: _____

Blood Type: _____ Fingerprints Available: ☐ Yes ☐ No Where: _____

Distinguishing Features/Unique Characteristics (limp, jewelry, glasses. etc...): _____

Dental Records Available? ☐ Yes ☐ No Medical Records Available? ☐ Yes ☐ No

Mental State (depressed, suicidal, etc...): _____

Location Last Seen (include city, state): _____



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Possible Destination (city, state): _____

Last Seen Wearing: _____

Hobbies & Interests: _____

Vehicle Year: _____ Make: _____ Model: _____

Vehicle Color: _____ Plate Number: _____ State: _____

Abductor/Companion's Name: _____
Last, First, Middle

Aliases: _____

Sex: ☐ Male ☐ Female Relationship: _____ Date of Birth: _____

Hair Color: _____ Dyed: ☐ Yes ☐ No Length: _____ Style: _____

Eye Color: _____ Glasses/Contacts: ☐ Yes ☐ No Blood Type: _____ Right/Left Handed: _____

Blood Type: _____ Fingerprints Available: ☐ Yes ☐ No Where: _____

Height: _____ Weight: _____ Build: _____ Race: _____

Social Security Number: _____

Additional Information: (distinguishing features, jewelry, tattoos, piercings, etc.):

Forward a copy of this report to:

Department of Public Safety
Missing Person's Information Clearinghouse
Law Enforcement Records Bureau
P.O. Box 1628
Santa Fe, New Mexico 87504-1628
1-800-HLP-FIND (457-3463) and/or 505-827-9026
Fax # 505-827-3399
Email: DPS.MissingPerson@state.nm.us