


SEX OFFENDER/CHILD KIDNAPPER PROOF OF PHYSICAL PRESENCE OUTSIDE ALASKA

	STATE OF ALASKA Department of Public Safety Division of Statewide Services 5700 East Tudor Road Anchorage, AK 99507 Phone (907) 269-0397 Toll Free 1-800-658-8892	Before your information will be removed from the Alaska Sex Offender / Child Kidnapper Central Registry, the AGENCY USE ONLY section of this form must be completed and signed by an official from: <input type="checkbox"/> The registration program in your new jurisdiction verifying that you are in compliance with the registration requirements of that program; OR <input type="checkbox"/> A government agency in your new jurisdiction verifying that you are physically present in that jurisdiction.
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PERSONAL INFORMATION				
FIRST NAME		MIDDLE NAME(S)	LAST NAME	
DATE OF BIRTH	SOCIAL SECURITY NUMBER	DRIVER'S LICENSE NUMBER	STATE	TRACKING NUMBER

PHONES AND ADDRESS				
HOME PHONE ()		CELL PHONE ()	MESSAGE PHONE ()	
RESIDENCE ADDRESS – The physical location of your home or other place where you now live.				
STREET ADDRESS	APT/SPACE#	CITY	STATE	ZIP CODE

1. What date did you leave Alaska? _____ / _____ / _____
Month Day Year

2. Have you registered with the sex offender registry in your new jurisdiction? YES NO

AGENCY USE ONLY			
GOVERNMENT AGENCY NAME		PHONE NUMBER	FAX NUMBER
MAILING ADDRESS	CITY	STATE	ZIP CODE
IS THE PERSON NAMED ABOVE PHYSICALLY PRESENT IN THIS JURISDICTION?			<input type="checkbox"/> YES <input type="checkbox"/> NO
IS THIS AGENCY RESPONSIBLE FOR REGISTERING SEX OFFENDERS WITHIN THIS JURISDICTION?			<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, IS THE PERSON NAMED ABOVE REQUIRED TO REGISTER WITHIN THIS JURISDICTION?			<input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, HAS THE PERSON NAMED ABOVE REGISTERED AND ARE THEY IN COMPLIANCE WITH THE REQUIREMENTS OF THIS JURISDICTION'S REGISTRATION PROGRAM?			<input type="checkbox"/> YES <input type="checkbox"/> NO
PRINTED NAME OF GOVERNMENT AGENCY OFFICIAL			
SIGNATURE OF GOVERNMENT AGENCY OFFICIAL			

READ CAREFULLY BEFORE SIGNING

I understand that if I move out of Alaska I must comply with the registration requirements of the jurisdiction I am moving to and that I must provide proof that I am not physically present in Alaska before my information will be removed from the Alaska Sex Offender / Child Kidnapper Central Registry. This form may be considered proof if it is completed in full.

In accordance with Alaska Statute 12.63.010(3), I swear under penalty of perjury that the information provided on this form and any attachment is true and correct. I understand that if I provide a false statement on this form I shall be subject to prosecution for perjury, which is a class B felony under Alaska Statute 11.56.200.

Signature of Registrant _____ Date _____