

MASSACHUSETTS STATE POLICE FACIAL RECOGNITION

PHOTO ARRAY REQUEST FORM

PHONE # 1-857-368-8605

FAX # 1-857-368-0645

DATE/TIME: 11/7/2018
OFFICER NAME & ID#: Mark McKEOWN # 50678 AGENCY: BPD C-6
CONTACT #: [REDACTED] FAX #: [REDACTED]
EMAIL ADDRESS: mark.mckeown@pa.boston.gov

TARGET: [REDACTED] D.O.B: [REDACTED]
(LAST, FIRST, INT)
MA. LIC#: [REDACTED] SSN: [REDACTED]

PLEASE STATE A DATE AND TIME YOU WILL BE AVAILABLE TO COME INTO THE FACIAL RECOGNITION OFFICE LOCATED IN THE TRANSPORTATION BUILDING AT 10 PARK PLAZA, BOSTON, MASS TO CHOOSE CANDIDATES FOR YOUR ARRAY REQUEST.

DATE: 11/8/2018

TIME: 1000 AM

YOU WILL BE NOTIFIED TO CONFIRM YOUR REQUEST DATE AND TIME HAS BEEN APPROVED.