

Regional Sex Offender Unit Sexual Offender No-Fixed Address Supplement



| Name: | | RPD, WCSO or SPD ID # | |
|-----------------------------|-----------------------------------|--|--|
| | (Please Print Full Name) | | |
| Date of Birth: | Social Security # | | |
| | | Model: | |
| Color: | License State: _ | Number: | |
| Are you living in your | vehicle? Yes No | | |
| Where do you go or st | ay during the daytime hours? | | |
| Where do you go for y | your meals? | | |
| Where do you go to sl | eep at night? | | |
| Do you have any inter | action or contact with the halfwa | y houses or homeless care agencies in the | |
| Reno/Sparks/Washoe | County area? Yes No | | |
| If yes, list all facilities | S: | | |
| Do you have friends in | n the area you can stay with? | Yes No | |
| If yes, list their name, | address, city: | | |
| When you have been of | employed what types of jobs have | e you done? | |
| | orary Services employment roster | | |
| Do you have any med | ical conditions requiring medical | treatment? Yes No | |
| If yes, where do you g | o for treatment: | | |
| If no, where did you g | o when you received treatment in | the past? | |
| Initial this page that | you have read all questions and | l provided no false/misleading statements: | |

| Do you receive subsidy (Social Security Check, Disability Check, etc.) If yes, from who? | | No | | |
|--|---------|-----------------------|--|--|
| When and where do you pick up your check? | | | | |
| Where do you pick up your mail? | | | | |
| Do you have any relatives in the Reno/Sparks/Washoe County area? If yes, list their name, address, city: | Yes | ☐ No | | |
| | | | | |
| Do you have any relatives in the Reno/Sparks/Washoe County area? | Yes | □ No | | |
| If you take up permanent residence (reside somewhere for two days or more) you must notify and reregister with the local law enforcement agency. Initial I certify that the information provided herein on these two pages is correct to the best of my knowledge. I understand that providing false or misleading information to the registration authority is a felony. (N.R.S. 179D.550) | | | | |
| Signature of Offender | | Date | | |
| Signature of Agency Representative | Print N | ame of Representative | | |