## **Pennsylvania State Police**

1800 Elmerton Avenue Harrisburg, Pennsylvania 17110

## **Response for Criminal Record Check**

BRIAN MICHAEL LEWANDOWSKI 850 HAWK VALLEY DRIVE LEECHBURG PA 15656

**TELEPHONE (724) 881-8114** 

(2) (4)

#### TO WHOM IT MAY CONCERN:

#### THE PENNSYLVANIA STATE POLICE DOES HEREBY CERTIFY THAT:

Name: Lewandowski, Brian Michael

Date of Birth: 07/12/1981

Social Security #: xxx-xx-6920

Sex: M

Race: White

Date of Request: 09/01/2021 10:14 AM

Purpose of Request: Employment

Maiden Name and/or Alias (1)

(3)

#### \*\*\* HAS NO CRIMINAL RECORD IN PENNSYLVANIA BASED ON A CHECK BASED ON THE ABOVE IDENTIFIERS - REFER TO CONTROL #R25788770 \*\*\*

THE RESPONSE IS BASED ON A COMPARISON OF DATA PROVIDED BY THE REQUESTOR AGAINST INFORMATION CONTAINED IN THE FILES OF THE PENNSYLVANIA STATE POLICE CENTRAL REPOSITORY ONLY. PLEASE CONFIRM IDENTIFIERS PROVIDED. POSITIVE IDENTIFICATION CANNOT BE MADE WITHOUT FINGERPRINTS THE PENNSYLVANIA STATE POLICE RESPONSE DOES NOT PRECLUDE THE EXISTENCE OF CRIMINAL RECORDS, WHICH MIGHT BE CONTAINED IN THE REPOSITORIES OF OTHER LOCAL, STATE, OR FEDERAL CRIMINAL JUSTICE AGENCIES. THE INFORMATION ON THIS CERTIFICATION FORM CAN BE VALIDATED BY ACCESSING THE PENNSYLVANIA ACCESS TO CRIMINAL HISTORY (PATCH) RECORD CHECK STATUS SCREEN (https://epatch.state.pa.us/RCStatusSearch.jsp) AND SUBMITTING A STATUS CHECK REQUEST THAT CONTAINS THE FOLLOWING - SUBJECT'S NAME (EXACTLY AS INITIALLY ENTERED), CONTROL NUMBER AND DATE OF REQUEST. PATCH WILL FIND AND DISPLAY THE CORRESPONDING RECORD CHECK REQUEST. DETAILS ON THE REQUEST CAN BE VIEWED BY CLICKING ON THE CONTROL NUMBER. YOU WILL BE ABLE TO VERIFY IF THIS REQUEST WAS SENT OUT AS A NO RECORD OR RECORD RESPONSE BY THE PENNSYLVANIA STATE POLICE.

QUESTIONS CONCERNING THIS CRIMINAL RECORD CHECK SHOULD BE DIRECTED TO THE PATCH HELP LINE TOLL FREE AT 1-888-QUERY-PA (1-888-783-7972).

**Certified by:** 

\* IL H that

Lt. Earl Rhoades Director of Criminal Records & Identifiation Pennsylvania State Police DISSEMINATED BY: SYSTEM 09/01/2021 10:16 AM



# PENNSYLVANIA CHILD ABUSE HISTORY CERTIFICATION



The above named person has applied for a Pennsylvania Child Abuse History Certification pursuant to 23 Pa. C.S., Chapter 63 related to the Child Protective Services Law. NO RECORDS EXIST in the Pennsylvania Department of Human Services' Statewide database listing BRIAN LEWANDOWSKI as a perpetrator of an Indicated or Founded report of child abuse.

Applicants are required to show the Administrator the results of their Child Abuse History Certification. Administrators are required to keep a copy of this Child Abuse History Certification on file. Any person altering the contents of this document may be subject to civil, criminal or administrative action.

> ISSUED BY Commonwealth of Pennsylvania Department of Human Services CHILDLINE AND ABUSE REGISTRY ChildLine Verification Unit P.O. Box 8170 Harrisburg, PA 17105-8170 1-877-371-5422

#### ANY ALTERATION OR ERASURE VOIDS THIS DOCUMENT



ICN E202124400000209394 CIDN OCA PAAWA000-OR-CHPA9110 LEWANDOWSKI, BRIAN MICHAEL DOB 1981/07/12 SOC XXX XX 6920 SEX M RAC W HGT 506 MNU TNIBT009Z TSA ESVP ENROLL SERV RESTON VA 2021/09/01 BE DAL. OFFICIAL CONTANDICANTUS ONLY A SEARCH OF THE FINGERPRINTS ON THE ABOVE INDIVIDUAL HAS REVEALED NO PRIOR ARREST DATA. 2021/09/01

## ARREST/CONVICTION REPORT AND CERTIFICATION FORM

(under Act 24 of 2011 and Act 82 of 2012)

		Section 1. Personal Information
		Brian Michael Lewandowski
Full Legal Name:		Date of Birth: $07/12/1981$
Other names by which you have been identified:		
		Section 2. Arrest or Conviction
Χ	By checking	this box, I state that I have NOT been arrested for or convicted of any Reportable Offense.
	By checking this box, I report that I have been arrested for or convicted of an offense or offenses enumerated under 24 P.S. §§1-111(e) or (f.1) ("Reportable Offense(s)"). See Page 3 of this Form for a list of Reportable Offenses.	
		Details of Arrests or Convictions
		For each arrest for or conviction of any Reportable Offense, specify in the space below (or on additional attachments if necessary) the offense for which you have been arrested or convicted, the date and location of arrest and/or conviction, docket number, and the applicable court.
		Section 3. Child Abuse
X		this box, I state that I have NOT been named as a perpetrator of a founded report of child the past five (5) years as defined by the Child Protective Services Law.
	By checking this box, I report that I have been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.	
		Section 4. Certification
By signing this form, I certify under penalty of law that the statements made in this form are true, correct and complete. I understand that false statements herein, including, without limitation, any failure to accurately report any arrest or conviction for a Reportable Offense, shall subject me to criminal prosecution under 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.		
<u> </u>	Druan	Bull enandonake 9/1/2021
Signo	iture	Date

PDE-6004 03/01/2016