Commonwealth of Massachusetts Sex Offender Registry Board

M.G.L. c. 6, § 178I REQUEST FOR SEX OFFENDER REGISTRY INFORMATION

All requests for sex offender information must be made on this form mailed to the Sex Offender Registry Board, Attn:	SORB USE ONLY
SORI Coordinator, P.O. Box 392, N Billerica, MA 01862,	
along with a self-addressed stamped envelope or scanned as PDF and emailed to SORI.SORI@MASS.GOV. The Board	
will provide a report that includes the following information: whether	
the person identified is a sex offender with an obligation to register, the offense(s) for which the offender was convicted or adjudicated, and the	
date(s) of the conviction(s) or adjudication(s). Please be advised that	
the law only permits the public to receive information on sex offenders required to register and finally classified by the Board as a level 2	
(moderate risk) or level 3 (high risk) offender. Therefore, information	
is not available to the public if the identified individual is a level 1 (low risk) offender or if he/she has not yet been finally classified by the	
Board.	
All requests shall be recorded and kept confidential, except to assist	or defend in a criminal prosecution.
*Requestor's name:	Date of birth:
*Organization name: (if any)	
*Address:	*Telephone number: ()
	*Email Address:
I swear under the pains and penalties of perjury that I am the above	named person, at least 18 years of age, and I am requesting information
for my own protection, the protection of a child under 18 years of care or custody.	ge, or for the protection of another person for whom I have responsibility
Requestor's signature:	Date:
I hereby request that the following information be used to determine whet	er the identified individual is a sex offender required to register in Massachusetts
Subject's LAST NAME:	
Subject's FIRST NAME::	
Subject's MIDDLE INITIAL:	
Date of birth or approximate age: / / /	
M M D D	Y Y Y AGE
IVI IVI D D I	1 1 1 AGE
Address (PRINT):	
Personal identifying characteristics:	
Sex: Race: Height: Weight:	Eye Color: Hair Color:
Other information (e.g. license plate number, parents' names, etc.):	

If additional information is needed, please contact the Requestor at the telephone number above.

SEX OFFENDER REGISTRY INFORMATION SHALL NOT BE USED TO COMMIT A CRIME OR TO ENGAGE IN ILLEGAL DISCRIMINATION OR HARASSMENT OF AN OFFENDER. ANY PERSON WHO USES INFORMATION DISCLOSED PURSUANT TO M.G.L. C. 6, §§ 178C – 178Q FOR SUCH PURPOSES SHALL BE PUNISHED BY NOT MORE THAN TWO AND ONE HALF (2 ½) YEARS IN A HOUSE OF CORRECTION OR BY A FINE OF NOT MORE THAN ONE THOUSAND DOLLARS (\$1000.00) OR BOTH (M.G.L. C. 6, § 178N). IN ADDITION, ANY PERSON WHO USES REGISTRY INFORMATION TO THREATEN TO COMMIT A CRIME MAY BE PUNISHED BY A FINE OF NOT MORE THAN ONE HUNDRED DOLLARS (\$100.00) OR BY IMPRISONMENT FOR NOT MORE THAN SIX (6) MONTHS (M.G.L. C. 275, § 4).