

To: Director, FBI (89-4286)
Attn: Criminal Investigative Division
Fugitive Unit

Date: 10/21/80

INSTRUCTIONS - Reverse side

NOTE: Priority "A" and "B" Fugitives - With initial submission, set forth a synopsis of crime on reverse side.

From: SAC, SAN FRANCISCO (89-250)

Subject: LAURENCE JOHN LAYTON, aka 11-26
FUGITIVE (A);
CONGRESSMAN LEO J. BRYAN - 3/31/79
VICTIM (DECEASED);
CAS
(OO: SF)

Initial Submission
 Supplements FD-65 dated 10/14/80

Indicate Fugitive Priority

- A
- B
- C

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 4/21/82 BY 4119 RDD

Wanted Class. before Nov. 23rd 5:30 PM '80
SPB

FUGITIVE INDEX

Caution <input type="checkbox"/>	MKE	Name	NAM	Sex	SEX	Race	RAC
Place of Birth	POB	Birth Date	DOB	Height	HGT	Weight	WGT
Eye Color	EYE	Hair Color	HAI	FBI No.	FBI	SKN	SKN
Scars, Marks, Tattoos, etc.	Ident Memo Rec'd	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date of Fugitive Card	NOV 4 1980	SMT	SMT
NCIC Fingerprint Classification	Other Identifying Number	Number	MNU	Social Security #	SOC		
Operator's License Number	Operator's License State	State	OLS	Year Expire	OLY		
Offense Charged	OFF						
U. S. Code, Title and Section							
Warrant Issued By	USDC, NDC Judge Robert Peckham	on	10/17/80	DOW	F. O. File #	OCA	
Miscellaneous Including Bond Recommended	MIS	Fingerprint Classification (Henry System)	13 0 9 R 001 8	L 18 U 001			
LICENSE PLATE AND VEHICLE INFORMATION							
License Plate Number	LIC	State	LIS	Year Expires	LIY	License Plate Type	LIT
Vehicle Identification #	VIN	Year	VYR	Make	VMA	Model	VMO
Aliases		Additional Identifiers					
NCIC #	NIC						

NCIC	SUPR. OPR. AGENT
ENTER <input type="checkbox"/>	
MODIFY <input checked="" type="checkbox"/>	
CLFAR <input type="checkbox"/>	
CANCEL <input type="checkbox"/>	
LOCATE <input type="checkbox"/>	

② - FBIHQ (1 - Fugitive Unit)
1 - San Francisco (89-250)
DRH/kjp 33 FEB 13 1981
(3)

10-2-80
10/21/80
11751

JAN 27 1981

NOV 03 1980

RECEIVED
CRIMINAL
INVESTIGATION
DIVISION

OCT 31 2 04 PM '80

U.S. DEPT. OF JUSTICE

INSTRUCTIONS

1. **Caution (MKE)** - Insert "C" in block if caution statement indicated. Basis for caution statement must appear in Miscellaneous block, e.g. armed and dangerous.
2. **Name (NAM)** - Place name in this block. Aliases are not to be entered in this block but are to be placed in Aliases block.
3. **Sex (SEX)** - Sex will be designated by one letter, M (male) or F (female).
4. **Race (RAC)** - Race will be described by one letter, W (white), N (Negro), I (Indian), C (Chinese), J (Japanese), O (all other). Mexicans who are not definitely Indian or other nonwhite should be described as "W".
5. **Place of Birth (POB)** - Indicate city and state or, if foreign born, city and country. Where multiple birthplaces are reported, list verified birthplace or that which appears most logical in this block.
6. **Birth Date (DOB)** - Enter as month, day and year. Where multiple birth dates are reported, enter verified birth date or that which appears most logical in this block. Place other dates of birth in Additional Identifiers block.
7. **Height (HGT)** - Express in feet and inches, e.g., 6' 0". Round off fractions to nearest inch.
8. **Weight (WGT)** - Express in pounds. Omit fractions.
9. **Eye Color (EYE)** - Use appropriate three character symbol.
10. **Hair Color (HAI)** - Use appropriate three character symbol.
11. **Skin Tone (SKN)** - Use appropriate three character symbol.
12. **Scars, Marks, Tattoos, etc. (SMT)** - Place in this block only appropriate NCIC coding for scars, marks, tattoos, birthmarks, deformities, missing body parts and artificial body parts as defined in NCIC Operating Manual. If more than one SMT is to be entered, use Additional Identifiers block for additional appropriately coded items. Use Miscellaneous block to describe all scars, marks, tattoos, etc. which are not defined in the NCIC Operating Manual and to more fully describe SMT's which have been entered in SMT block. For example, an appendectomy scar, not being readily visible, would be described in the Miscellaneous block. A tattoo on right arm, shown as TAT R ARM in block, might be further described in Miscellaneous block as a rose tattoo on inside of lower right arm.
13. **NCIC Fingerprint Classification (FPC)** - Enter NCIC fingerprint classification.
14. **Other Identifying Number (MNU)** - Miscellaneous numbers may be entered with appropriate identifiers (prefixes). For first miscellaneous identifying number, use MNU block. When military service number is in fact Social Security Account Number, the number should be entered in both MNU and SOC blocks. Additional identifying numbers are placed in Additional Identifiers block. The identifier (prefix) should precede the number and be separated from the number by use of a hyphen. See NCIC Operating Manual, Part 9, page 26 for appropriate agency identifiers.
15. **Fingerprint classification (Henry System)** - The Henry System fingerprint classification is to be placed in this block, when available. Do not enter in NCIC.
16. **Social Security Number (SOC)** - Place subject's Social Security Account Number in this block.
17. **Operator's License Number** - Place subject's operator's license number in OLN block. Also show licensing state (OLS) and year license expires (OLY).
18. **Warrant Issued By-On- (DOW)** - In Escaped Federal Prisoner cases enter date of escape in DOW block.
19. **Miscellaneous (MIS)** - Enter additional pertinent information in this block. If caution statement used, basis for statement must be set forth as first item in this block.
20. **License Plate and Vehicle Information** - Place information concerning license plate and/or vehicle known to be in the possession of subject in appropriate blocks under License Plate and Vehicle Information heading.
21. **Additional Identifiers** - Enter information concerning additional license plates (number, state, year expires, and where applicable, type); Social Security Numbers; operator's license number, state and year expires; vehicle information (VIN, VYR, VMA, VMO, VST, VCO); MNU's (see list in item 14 above); visible scars, marks, tattoos, etc.; and dates of birth. Clearly identify what data is being set forth; e.g. Social Security # 423-56-3294; Michigan operator's license 234567, expires 1972; DOB's 4/5/32, 5/3/32; etc.
22. Changes and deletions should be so indicated in the appropriate blocks.