

## Report of Conviction for Possession of Controlled Substances or Marijuana

<b>Driver's License</b>	Surrendered	or Lost License Affidavit Completed?
☐ Yes	□ No	(attach to form)

Felonies	Defendant Information:
□ §16-13-30: Possession of controlled substance	Name
□ §16-13-30.1: Possession of a non-controlled substance	Last License State
□ §16-13-30.3(b)(1): Possession of certain amounts of ephedrine	Date of Birth (mm/dd/yy)
□ §16-13-30.3(d): Altering ephedrine products	
$\square$ §16-13-30.4(g)(2): Ephedrine sales for the purpose of manufacturing	Address:
□ §16-13-30.5: Possession of substances for manufacturing of controlled substances	
□ §16-13-31: Trafficking	City
□ §16-13-31.1: Ecstasy Trafficking	Arresting Agency:
□ §16-13-32.3: Use of a communication facility to commit a felony	
□ §16-13-32.4: Drug-free school zone	Date of Offense:
□ §16-13-32.5: Drug-free recreation/housing project zone	County of Offense
□ §16-13-32.6: Drug-free commercial zone	
□ §16-13-33: Conspiracy	Court Name:
□ §16-13-42: Unlawfully dispensing prescriptions	Court NCIC #:
□ §16-13-43: Unlawfully distributing prescriptions	Court Address:
	Street
IF FELONY, WAS A COMMERCIAL MOTOR VEHICLE INVOLVED?	City
	Court Case #:
Misdemeanors	Disposition Date(mm/dd/yy):
□ §16-13-2: Possession of Marijuana, less than 1 oz.	$\square$ (4) Nolo Cont'd $\square$ (2) Bo
□ §16-13-30.2: Possession of Imitation Controlled Substance	Fine Amount \$
□ §16-13-30.3(b.1)(1): Restriction on commercial sales of ephedrine	
□ §16-13-30.4: Ephedrine storage and licensing requirements	
□ §16-13-32: Transactions in drug related objects	(Signature of Clerk or Official of th
□ §16-13-32.1: Transactions in drug related objects	Mail to: Depart
□ \$16-13-32.2: Possession of drug related objects	Custon Post O

Defendant Information	:				
Name Last	First #_		Middle		
	·)				
Address:Street					
City		State	Zip		
Arresting Agency:					
Date of Offense:					
County of Offense		County Code			
Court Name:					
Court NCIC #:					
Court Address: Street					
City	State	Zip			
Court Case #:					
Disposition Date(mm/dd/yy):					
☐ (4) <i>Nolo Cont'd</i> Fine Amount \$	☐ (2) Bond Forfeiture	□ (1) Guilty			
(Signature of Clerk or Official of the Court)					

Mail to: Department of Driver Services
Customer Service, Licensing, and Records Division
Post Office Box 80447 Conyers, GA 30013