



North Castle Police Department
15 Bedford Road, Armonk, NY 10504
Telephone: 914-273-9500; Fax: 914-273-5412

Sex Offender Registry Information

Offender Level: 1

Offender Identity:

Offender ID: **40934**
Last Name: **Rich**
First Name: **David**
Middle Name:
AKA:



Residence Address:

Zip Code: **10504**

Description:

Date of Birth:	08/23/1969	Sex:	Male	Race:	White
Ethnicity:	Non-Hispanic	Height:	6'00"	Weight:	200
Hair:	Gray	Eyes:	Green	Corrective Lenses:	No

Crime Information:

Title	Section	Subsection	Class	Category
Penal Law	235.22		E	Felony
Description:	Attempted Disseminate Indecent Material to Minors – 1st degree			
Modus Operandi:	Attempted, more than once to disseminate indecent materials to a minor.			

Status:

Risk Level:	1	Designation:	None
Registration Date:	05/18/2014	90-Day Verification Required?	No

Victim Sex / Age:

Notice: The use of this information to injure, harass or commit a criminal act against this person, or any person, may be subject to criminal prosecution.

Information provided is in accordance with the provisions of the Sex Offender Registration Act in conjunction with the New York State Department of Criminal Justice Services.