

REQUEST FOR LIVE SCAN SERVICE

ORI: CA0349435

Type of Application: (check one)  Record Review

DOJ Visa/Immigration Clearance Letter

(Visa/Immigration, Letter of Good Conduct, Police Clearance Letter, Foreign Adoption)

(Job Title)  
Reason for Application: \_\_\_\_\_

Agency Address Set Contributing Agency:

California Department of Justice  
Record Review Unit  
P.O. Box 903417  
Sacramento, CA 94203-4170

Mail Code: 07041

Contact Name: Record Review Unit  
Contact Telephone No. (916) 227-3832

Name of Applicant: \_\_\_\_\_  
(Please print) Last First MI

AKA's: \_\_\_\_\_  
Last First

Date of Birth: \_\_\_\_\_ SEX:  Male  Female Billing No. N/A

HT: \_\_\_\_\_ WT: \_\_\_\_\_ Applicant's Address:

EYE Color: \_\_\_\_\_ HAIR Color: \_\_\_\_\_  
Street or P.O. Box

Place of Birth: \_\_\_\_\_  
(State or Foreign Country) City, State and Zip Code

Social Security Number: \_\_\_\_\_

California Driver's License No. \_\_\_\_\_  
Daytime Telephone Number

Level of Service  DOJ Only If Resubmission, list Original ATI No. \_\_\_\_\_

MAILING ADDRESS

(Employer Address)

Please list you mailing address from above, or if you wish this record forwarded to someone other than yourself, or if you wish this record mailed to an address different from the one listed above, complete the following:

Name: \_\_\_\_\_ Title

Address: \_\_\_\_\_  
Number Street Apt or Suite No.

City State Zip Code

Live Scan Transaction Completed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Operator

Transmitting Agency: \_\_\_\_\_ Terminal ID: \_\_\_\_\_ Amount Collected: \_\_\_\_\_

ATI Number: \_\_\_\_\_

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