

State of California

REQUEST FOR LIVE SCAN SERVICE
SCL 0195 (2/87)

Applicant Submission

JAMOSTOWN

984-3012

APP.

Department of Justice

FAX

984-3017

WED 1-330

ORI: A2652

Type of Application:

Volunteers

Code assigned by DOJ

Job Title or Type of License, Certification or Permit:

Agency Address Set Contributing Agency:

United Camps

Agency authorized to receive criminal history information

03086

Mail Code (five-digit code assigned by DOJ)

1304 South Point Blvd., #260

Street No. Street or PO Box

Sally Shine

Contact Name (Mandatory for all school submissions)

Petaluma,

CA

94954

City

State

Zip Code

(707) 762-3185 ext. 203

Contact Telephone No.

Name of Applicant:

(Please print)

Last

First

MI

Alias:

Last

First

Driver's License No:

Date of Birth:

Sex:

Male

Female

Misc. No. BIL -

Agency Billing Number

Height:

Weight:

Misc. Number:

Home Address:

Eye Color:

Hair Color:

Street No.

Street or PO Box

Place of Birth:

City, State and Zip Code

Social Security Number:

Your Number:

OCA No. (Agency Identifying No.)

Level of Service:

DOJ

FBI

If resubmission, list Original ATI

Number:

Employer: (Additional response for agencies specified by statute)

Employer Name



Street No.

Mail Code (five digit code assigned by DOJ)

City

22988 Ferretti Road • Groveland, CA 95321

Agency Telephone No. (optional)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

ATI No.

Amount Collected/Refilled

ORIGINAL - Live Scan Operator; SECOND COPY - Applicant; THIRD COPY (if needed) - Requesting Agency