



REQUEST FOR LIVE SCAN SERVICE (Record Review or Foreign Adoption)

Applicant Submission

CA0349435 Type of Application (Check One Only) Record Review Foreign Adoption

ORI (Code assigned by DOJ)

Record Review

Reason for Application

Contributing Agency Information:

DEPARTMENT OF JUSTICE

Agency Authorized to Receive Criminal Record Information

P.O. BOX 903417

Street Address or P.O. Box

SACRAMENTO

City

CA 94203-4170

State ZIP Code

07041

Mail Code (five-digit code assigned by DOJ)

RECORD REVIEW UNIT

Contact Name (mandatory for all school submissions)

(916) 227-3849

Contact Telephone Number

Applicant Information:

Last Name

Other Name

(AKA or Alias)

Last

First Name Middle Initial Suffix

First Suffix

Date of Birth

Sex Male Female

Driver's License Number

Height

Weight

Eye Color

Hair Color

Misc. Number (Other Identification Number)

Place of Birth (State or Country)

Social Security Number

Telephone Number

Street Address or P.O. Box

City State ZIP Code

Level of Service: DOJ Only

If re-submission, list original ATI number (Must provide proof of rejection):

Original ATI Number

Foreign Government Embassy: (MANDATORY FOR FOREIGN ADOPTION REQUESTS ONLY)

Embassy Name

Street Address or P.O. Box

City State Country ZIP Code Embassy Telephone Number (optional)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed