



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

A2733 Volunteer
 ORI (Code assigned by DOJ) Authorized Applicant Type

Volunteer
 Type of License/Certification/Permit OR Working Title (Maximum 30 characters - If assigned by DOJ, use exact title assigned)

Contributing Agency Information:

Roman Catholic Bishop of Sacramento 08893
 Agency Authorized to Receive Criminal Record Information Mail Code (five-digit code assigned by DOJ)

2110 Broadway Mayra Perez
 Street Address or P.O. Box Contact Name (mandatory for all school submissions)

Sacramento CA 95818
 City State ZIP Code 9167330237
Contact Telephone Number

Applicant Information:

Last Name First Name Middle Initial Suffix

Other Name: (AKA or Alias)

Last Name First Name Suffix

Date of Birth Sex Male Female Nonbinary/Unspecified

Height Weight Eye Color Hair Color

Place of Birth (State or Country) Social Security Number

Home Address Street Address or P.O. Box City State ZIP Code

Driver's License Number

Billing Number (Agency Billing Number)

Misc. Number (Other Identification Number)

I have received and read the included Privacy Notice, Privacy Act Statement, and Applicant's Privacy Rights.

Applicant Signature Date

Your Number: SP49 St Dominic's Church Level of Service: DOJ FBI
OCA Number (Agency Identifying Number) (If the Level of Service indicates FBI, the fingerprints will be used to check the criminal history record information of the FBI.)

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

Employer (Additional response for agencies specified by statute):

Employer Name

Street Address or P.O. Box Telephone Number (optional)

City State ZIP Code Mail Code (five digit code assigned by DOJ)

Live Scan Transaction Completed By:

Name of Operator Date

Transmitting Agency LSID ATI Number Amount Collected/Billed

CAPITAL LIVE SCAN

BILL NOTICE

St Dominic's Church Benicia

ORI: A2733

OCA: X-1170

Valid at Capital Live Scan Locations

For a full list of locations visit:

<https://www.capitallivescan.com/walk-in-services>

PLEASE BRING: Your Request for Live Scan Service form, valid government issued ID, and this notice.

ATTN TECHNICIAN: DO NOT COLLECT