

REQUEST FOR LIVE SCAN SERVICE

Annlinent Culturianien		
Applicant Submission		
AM671 ORI (Code assigned by DOJ) VOLUNTEER/VCA	Authorized Applicant Type	
Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if	assigned by DOJ, use exact title assigned)	\$45,000 per 1950 1950 per 195
Contributing Agency Information:		
AMERICAN FAMILY LIVING	23144	
Agency Authorized to Receive Criminal Record Information	Mail Code (five-digit code assigned by DOJ)	
1774 N GLASSELL ST		
Street Address or P.O. Box	Contact Name (mandatory for all school submiss	ions)
ORANGE CA 92865 City State ZIP Code	Contact Telephone Number	
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Applicant Information:		
Last Name	First Name	Middle Initial Suffix
Other Name		
(AKA or Alias) Last	First	Suffix
Date of Birth Sex Male Female	Driver's License Number	
Height Weight Eye Color Hair Color	Number 157053 (Agency Billing Number)	na Minicipi Marian da maja da Timbopo da manara kanda a da sa.
Place of Birth (State or Country) Social Security Number	Misc. Number	
	(Other Identification Number)	
Home Address Street Address or P.O. Box	City	State ZIP Code
Your Number: OCA Number (Agency Identifying Number)	Level of Service: X DOJ FE	31
If re-submission, list original ATI number: (Must provide proof of rejection)	Original ATI Number	
Employer (Additional response for agencies specified by statute):		
Employer Name	Mail Code (five digit code assigned by DOJ)	
Street Address or P.O. Box		
City State ZIP Code	Telephone Number (optional)	
Live Scan Transaction Completed By:		
Name of Operator	Date	
Transmitting Agency LSID	ATI Number Amount	Collected/Billed

Michael's Live Scan 1542 E. Collins Ave. Orange, CA 92867 (714) 532-5964 or (714) 928-1937

Walk-ins and appointments are welcome.

Hours: Monday ~ Friday 9:30 – 5:30 (After 5:30 or Saturday and Sunday, by appointment only). Live scan to be done inside the Farmers Insurance office.

Fee: \$17.00) We accept Cash/Money Order/Credit Card/Debit Card



