

**REQUEST FOR LIVE SCAN SERVICE**

BCII 8016 (3/07)

**Clear Form**

**Applicant Submission**

ORI: A2963 Type of Application: Volunteer  
Code assigned by DOJ

Job Title or Type of License, Certification or Permit: Cathedral of the Annunciation

Agency Address Set Contributing Agency:

Diocese of Stockton 08620  
Agency authorized to receive criminal history information Mail Code (five-digit code assigned by DOJ)

212 N. San Joaquin Street Cathy Lagomarsino  
Street No. Street or PO Box Contact Name (Mandatory for all school submissions)

Stockton CA 95202 ( 209 ) 466-0636 Extension 611  
City State Zip Code Contact Telephone No.

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

Alias: \_\_\_\_\_ Driver's License No: \_\_\_\_\_  
Last First

Date of Birth: \_\_\_\_\_ Sex:  Male  Female Misc. No. BIL - \_\_\_\_\_  
Agency Billing Number

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Misc. Number: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_  
Street No. Street or PO Box

Place of Birth: \_\_\_\_\_  
City, State and Zip Code

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

Your Number: Cathedral of the Annunciation  
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. Street or PO Box Mail Code (five digit code assigned by DOJ)

City State Zip Code ( ) Agency Telephone No. (optional)

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

Transmitting Agency ATI No. Amount Collected/Billed