

REQUEST FOR LIVE SCAN SERVICE

Applicant Submission					
AA498		Volunteer			
ORI (Code assigned by DOJ)		Authorized Applicant Type			
Volunteer					
Type of License/Certification/Permit OR Working Title	Maximum 30 characte	rs - if assigned by DOJ, use	exact title assigned)		
Contributing Agency Information:					
AYSO (American Youth Soccer Organization)		05335			
Agency Authorized to Receive Criminal Record Information		Mail Code (five-digit code assigned by DOJ)			
19700 S Vermont Ave #103 Street Address or P.O. Box		XXXX Contact Name (mandatory for all school submissions)			
	00500			ooi subinissions)	
Torrance CA City State	90502 ZIP Code	(800) 872-2976 Contact Telephone Number			
Applicant Information:					
Applicant mornation.					
Last Name	***************************************	First Name		Middle Initial	Suffix
Other Name: (AKA or Alias)					
Last Name	First Name			Suffix	
Sex Male F	emale				
Date of Birth		Driver's Licens	e Number		
		Billing			
Height Eye Color	Hair Color	Number			
Diogo of Birth (Ctate or County)		Misc.	/ Billing Number)		
Place of Birth (State or Country) Social Security Nu	imber	Number xxx	dentification Number)		
Home		Culei i	denuncation (varioer)		
Address Street Address or P.O. Box		City		State ZIP C	ode
I have received and read the included	l Privacy Notice	, Privacy Act Sta	tement, and Appl	icant's Privacy Rights.	
Applicant Signature				Date	
Your Number: 10E4	Level of Service: X DOJ T 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.)			
16 -a automicaian list arisinal ATI		Chilinal history is	ecora imormation or tr	le rdi.)	
If re-submission, list original ATI number: (Must provide proof of rejection) Origina	al ATI Number				****
Employer (Additional response for agencies spe	cified by statute	a):			
XXXX		,,-			
Employer Name					
XXX				XXXX	
Street Address or P.O. Box	·		Telephone Numbe		
XXXX		XXXX	_		
City	State	ZIP Code	Mail Code (five dig	it code assigned by DOJ)	
ive Scan Transaction Completed By:					
Name of Operator		Date			
Transmitting Agency LSID		ATI Number		Amount Collected/Billed	