

# Fingerprint Instructions

## **Livescan Fresno**

559-476-6853

1754 E. Bullard Ave #105

Fresno, CA 93710

## **Hours:**

Monday-Friday: 9am-6pm Closed for Lunch 1-2pm;

Saturday: 8am-12pm

## **Service Requests:**

DOJ- California Personal Record Review cost \$45

FBI cards- \$20 for 1 card or \$30 for two

\$18 Money Order for FBI Request

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# Instrucciones Para Servicio de Huellas

## **Livescan Fresno**

559-476-6853

1754 E. Bullard Ave #105

Fresno, CA 93710

## **Horas de Operación:**

Lunes-Viernes 9am-6pm (cerrado de 1-2pm)

Sábado 8am-12pm

## **Servicios necesarios:**

DOJ- Solicitud de información personal, del Estado de California; costo \$45

Cartilla de FBI- \$20 para una cartilla o \$30 por dos

\$18 Money Orden para huellas de FBI

## INSTRUCTIONS FOR GETTING FINGERPRINTS

### STEPS:

1. Go to a live scan facility
2. Complete the DOJ Request For Live Scan form
3. Complete the FBI request form
4. Pay for services
5. Receive documents in the mail

### COST

1. DOJ - \$25
2. FBI - \$18 via money order
3. Livescan facility – cost will vary by location, but usually \$20 - \$30

### STEP 1: FIND A LIVE SCAN FACILITY NEAR YOU

1. Go to <https://oag.ca.gov/fingerprints/locations>
2. Select your county find a facility near you
3. The results will look like this:

#### Select County

Fresno

Search:

Location	Hours	Rolling fee	Acceptable Forms of Payment
<b>IdentoGO by IDEMIA dbw PSI</b> 1 (800) 315-4507 (Appointment Scheduling) cafingerprint@morphotrust.com <b>Mobile services are available</b>	Weekdays Appt. only	\$22.00	<ul style="list-style-type: none"><li>• Billing Accounts</li><li>• Cashier's Check</li><li>• Checks</li><li>• Company Checks</li><li>• Credit Cards</li><li>• IIS Escrow Accounts</li><li>• Money Order</li></ul>
<b>All American Live Scan</b> 1526 Clovis Avenue #A Clovis, CA 93612 (559) 325-6541 rlorin@att.net <b>Mobile services are available</b> <a href="https://www.ApplicantServices.com/CA-Social-Distancing">https://www.ApplicantServices.com/CA-Social-Distancing</a>	Weekdays Walk-ins & Appointments 10:00 am to 5:00 pm  Saturday Appt. only	\$20.00	<ul style="list-style-type: none"><li>• Billing Accounts</li><li>• Cash</li><li>• Cashier's Check</li><li>• Company Checks</li><li>• Corporate Accounts</li><li>• Credit Cards</li><li>• Debit Cards</li><li>• Money Order</li></ul>
<b>Certifix Live Scan dbw Senior Helpers</b> 1416 Clovis Avenue Suite #208 Clovis, CA 93612 1 (559) 494-4080 info@certifixlivescan.com <a href="https://www.certifixlivescan.com/CA-Social-Distancing.html">https://www.certifixlivescan.com/CA-Social-Distancing.html</a>	Tuesday Walk-ins & Appointments 9:00 am to 11:30 pm  Tuesday Appt. only 1:30 pm to 3:30 pm	\$25.00	<ul style="list-style-type: none"><li>• Cash</li><li>• Cashier's Check</li><li>• Money Order</li></ul>

## STEP 2: COMPLETE THE DOJ REQUEST FOR LIVE SCAN

1. Check "Record Review" as the "type of Application"
2. Enter "Record Review" on the "Reason for Application" line
3. Fill out "Applicant Information" with your personal information

STATE OF CALIFORNIA  
BCIA 8016RR  
(orig. 04/2001; rev. 10/2014)

DEPARTMENT OF JUSTICE  
Page 1 of 2

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

Applicant Submission

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

ORJ (Code assigned by DOJ)

**Record Review**

Reason for Application

Contributing Agency Information:

<b>DEPARTMENT OF JUSTICE</b> Agency Authorized to Receive Criminal Record Information	<b>07041</b> Mail Code (five-digit code assigned by DOJ)
<b>P.O. BOX 903417</b> Street Address or P.O. Box	<b>RECORD REVIEW UNIT</b> Contact Name (mandatory for all school submissions)
<b>SACRAMENTO</b> <b>CA 94203-4170</b> City State ZIP Code	<b>(916) 227-3835</b> Contact Telephone Number

Applicant Information:

Last Name	First Name	Middle Initial	Suffix
Other Name (AKA or Alias) Last	First		Suffix
Date of Birth	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Driver's License Number	
Height	Weight	Eye Color	Hair Color
Place of Birth (State or Country)	Social Security Number		Misc. Number (Other Identification Number)
Street Address or P.O. Box	Telephone Number		
	City	State	ZIP Code

Level of Service:  DOJ Only

# SAMPLE DOJ REQUEST FORM



STATE OF CALIFORNIA  
BCIA 8016RR  
(orig. 04/2001; rev. 10/2014)

## 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)

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) 227-3835

Contact Telephone Number

### Applicant Information:

Last Name

Other Name

(AKA or Alias) Last

Date of Birth

Sex  Male

Female

Height

Weight

Eye Color

Hair Color

Place of Birth (State or Country)

Social Security Number

Street Address or P.O. Box

First Name

Middle Initial

Suffix

First

Suffix

Driver's License Number

Misc. Number (Other Identification Number)

Telephone Number

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 pursuant to Penal Code section 11105(c)(12))

Designee -- Do not include Employer: (Optional for individual designated by applicant to Penal Code section 11124)

Designee or Embassy Name

Street Address or P.O. Box

City

State

Country

ZIP Code

Telephone Number

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

TSID

ATI Number

Amount Collected/Billed

### STEP 3: COMPLETE THE FBI REQUEST

1. Fill out the "Applicant Information" section form with your information (it's outlined in green on the sample form)
2. If you want our office to mail the FBI request for you, bring us:
  - a. the FBI request form
  - b. A money order for \$18, please make sure to sign it
  - c. your fingerprints (the livescan facility will stamp your fingerprints on a paper)
3. If you want to send the request yourself:
  - a. Complete the FBI request form, see example. On the "mail results to address" section, put NALC's address so the results are sent to our office
  - b. Get an \$18 money order:
    - i. Sign the money order
    - ii. Put the FBI's name and address

### EXAMPLE MONEY ORDER:

THE FRONT OF THE DOCUMENT HAS A MICRO-PRINT AMOUNT BOX AND THERMOCHROMIC. ABSENCE OF THESE FEATURES WILL INDICATE A COPY.

ISSUING AGENT

75-53  
919

07/24/2008

**WAL★MART** MoneyGram Money Orders  
INTERNATIONAL MONEY ORDER

R 200875803129

20087580312  
MONEY ORDER

▼ ▼ PAY ONLY THIS AMOUNT ▼ ▼

\*\*\*\$585.00\*\*\*

FIVE HUNDRED EIGHTY FIVE DOLLARS AND 00 CENTS\*\*\*

Pay TO THE ORDER OF: / PAGAR A LA ORDEN DE: **FBI CJIS Division – summary request**

IMPORTANT - SEE BACK BEFORE CASHING

Your signature

PURCHASER, SIGNER FOR DRAWER / COMPRADOR, FIRMA DEL LIBRADOR  
PURCHASER, BY SIGNING YOU AGREE TO THE SERVICE CHARGE AND OTHER TERMS ON THE REVERSE SIDE

ADDRESS: / DIRECCION: **1000 Custer Hollow Road, Clarksburg, West Virginia 26306**

Payable Through  
WF National Bank  
South Central  
Faribault, MN

ISSUER/DRAWER:  
MONEYGRAM PAYMENT SYSTEMS, INC.

60528276642766  
1279800197167312

TO AUTHENTICATE RUB CIRCLE  
PARA AUTENTICAR RESTREGAR EL CIRCULO

⑆091900533⑆2008 75803129⑈ 90

# SAMPLE FBI REQUEST FORM

I-783 (Rev. 04-02-2014)

OMB-1110-0052

## PRIVACY ACT STATEMENT

The FBI's acquisition, retention, and sharing of information submitted on this form is generally authorized under 28 USC 534 and 28 CFR 16.30-16.34. The purpose for requesting this information from you is to provide the FBI with a minimum of identifying data to permit an accurate and timely search of identity history identification records. Providing this information (including your Social Security Account Number) is voluntary; however, failure to provide the information may affect the completion of your request. The information reported on this form may be disclosed pursuant to your consent, and may also be disclosed by the FBI without your consent pursuant to the Privacy Act of 1974 and all applicable routine uses. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 3 minutes to complete.

### Applicant Information \* Denotes Required Fields

\*Last Name \_\_\_\_\_ \*First Name \_\_\_\_\_  
Middle Name 1 \_\_\_\_\_ Middle Name 2 \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_ \*Place of Birth: \_\_\_\_\_ U.S. Citizen or Legal Permanent Resident:  
Yes  No

\*Country of Citizenship: \_\_\_\_\_ Country of Residence: \_\_\_\_\_ Prisoner Number (if applicable): \_\_\_\_\_

\*Last Four Digits of Social Security Number: \_\_\_\_\_

\*Height: \_\_\_\_\_ \*Weight: \_\_\_\_\_

#### \*Hair (please check appropriate box):

Bald  Black  Blonde/Strawberry  Blue  Brown  Gray  Green  Orange  Pink  
 Purple  Red/Auburn  Sandy  Unknown  White

#### \*Eyes (please check appropriate box):

Black  Blue  Brown  Gray  Green  Hazel  Maroon  Multicolored  Pink  Unknown

### Applicant Home Address

\*Address \_\_\_\_\_

\*City \_\_\_\_\_ \*State \_\_\_\_\_

\*Postal (Zip) Code \_\_\_\_\_ \*Country \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail \_\_\_\_\_

### Mail Results to Address

C/O San Joaquin College of Law - NALC ATTN Linda Barreto

Address 901 5th Street

City Clovis State CA

Postal (Zip) Code 93612 Country USA

Phone Number (if different from above) (559) 326-1553

### Payment Enclosed: (please check appropriate box)

CERTIFIED CHECK  MONEY ORDER  CREDIT CARD FORM

### Reason for Request:

Personal review  Challenge information on your record  Adoption of a child in the U.S.  
 International adoption  Live, work, or travel in a foreign country  Other

\* APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Mail the signed applicant information form, fingerprint card, and payment of \$18 U.S. dollars to the following address:

FBI CJIS Division - Summary Request  
1000 Custer Hollow Road  
Clarksburg, West Virginia 26306

You may request a copy of your own Identity History Summary to review it or obtain a change, correction, or an update to the summary.

This is the name and address you will write on the money order.