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ORIGINATING AGENCY # LSD000816

Serving The Tampa Bay Area

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LIVESCAN RECEIPT

TCN# 70CB44000002

Date: ____/____/____

Reason: _____

AHCA, APD, DBPR, DCF, DMV, DOH, Medicaid, Vechs

ORI # ✓DOEPRIV3

OCA # _____

PHOTO: _____

___ CASH ___ CHECK # _____

___ CREDIT CARD

TOTAL AMOUNT \$ _____

LAST NAME, FIRST NAME MIDDLE

STREET ADDRESS

CITY, STATE ZIP

How did you hear about us?

Please allow 3-5 business days for FDLE to process background checks and for your requesting Agency to receive and post your results.

FOR YOUR PRIVACY: We do not receive a copy of your results, status updates, information, or communication of any kind from FDLE or your Agency. If you have any questions about the status of your background check or timeframes call FDLE 1-850-410-8161. Call or email us if you have other questions.

Anytime Mobile Fingerprinting, LLC Thanks You For Your Business.

Please fill in Personal Information below requested by FDLE

Social Security Number: _____

NOTE: Social Security # is required for your requesting agency to access your background check.

If you prefer you may contact your agency and provide them with the number directly.

Date of Birth: Month: ____ Day: ____ Year: ____ (Month / Day / Year)

Place of Birth: _____ (State's Name if in U.S. or Foreign Country's Name)

U.S. Citizen: Yes ___ Country of Citizenship If Not U.S. _____

Gender: (Please Circle One) Female Male Unknown

Race: Asian/Oriental Black Amer-Indian/Alaskan-Native Latino-Black Latino-White Unknown White

Eye Color: Black Blue Brown Green Gray Hazel Maroon Multicolored Pink Unknown

Hair Color: Bald Black Blonde/Strawberry Brown Gray/PartialGray Red/Auburn Sandy White Other _____

Height: ____ ft ____ in Contact

Phone #: _____

Weight: ____ lbs or E-mail _____

Anytime Mobile Fingerprinting, LLC will not sell, use or disseminate any of the above information given except for the sole purpose of providing FDLE (Florida Department of Law Enforcement) the needed information to perform your level II background check. In no event shall Anytime Mobile Fingerprinting, LLC be held liable for damages of any kind (including, but not limited to, special, incidental, or consequential damages, lost profits, or lost data that may occur regardless of the foreseeability of those damages). Your personal information is strictly confidential.

Customer Signature: _____ Date: _____