



**PACIFIC ASSOCIATION USATF  
CRIMINAL BACKGROUND SCREENING PROGRAM**

Enclosed with this letter you will find a Request for Live Scan Service application. for you and the coaches listed on your club form who are current USATF members. You will need to take this form with you along with photo proof of ID, to have a Live Scan done at your local police department or agency.

The list of agencies and police, departments that perform live scans can be found on the Department of Justice website at this address:

<http://ag.ca.gov/fingerprints/publications/contact.php>

On this list find your county and look for the nearest Live Scan operator. Please note that each operator may have different hours of operation and in some cases may require an appointment. Also be sure that the scan operator has updated their system which is to be done on a weekly basis. If their system is not updated they may not have our ORI number in their system and you cannot get scanned at this location.

You will need to pay the FBI fee (\$18) and scan fee (\$10-20) but not the DOJ fee (\$32) which is being waived due to our not-for-profit status. Send your receipt to my office and we will reimburse you for these fees.

If you add other coaches/parent/volunteers during the year, they will need to be scanned also. Please send me their names and current USATF numbers and I will send them the scan forms.

Once you are scanned you will not need to do this again. The DOJ will continue to track all persons until you decide to retire from coaching.

Thank you for your cooperation with this most valuable program.

Sincerely,

A handwritten signature in black ink, appearing to read "John Mansoor", written in a cursive style.

John Mansoor, Executive Director

**REQUEST FOR LIVE SCAN SERVICE**  
**Applicant Submission**

**ORI:** A9319 **Type of Application:** Volunteer

**Job Title or Type of License, Certification or Permit:** Coach

**Agency Address Set Contributing Agency:**

Pacific Association  
Agency authorized to receive criminal history information

120 Ponderosa Ct.  
Street No. Street or PO Box

Folsom CA, 95630  
City State/Zip Code

11036  
Mail Code (five digit code assigned by DOJ)

John Mansoor  
Contact Name (mandatory for all school submissions)

(916)983-4715  
Contact Telephone Number

**Name of Applicant:** \_\_\_\_\_

**Alias:** \_\_\_\_\_

**Driver's License No.** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Sex:** Male Female

**Misc. No. BIL -** 147771  
Agency Billing Number

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

**Misc. No.** \_\_\_\_\_

**Eye Color:** \_\_\_\_\_ **Hair Color:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Place of Birth:** \_\_\_\_\_

\_\_\_\_\_  
City, State and Zip code

**SOC:** \_\_\_\_\_

**Your Number:** \_\_\_\_\_  
OCA (Agency Identifying Number)

**Level of Service:**  DOJ  FBI

**If resubmission, list original ATI No.** \_\_\_\_\_

**Employer: (Additional response for agencies specified by statute)**

\_\_\_\_\_  
Employer Name

\_\_\_\_\_  
Street No. Street or PO Box

\_\_\_\_\_  
City State/Zip Code

11036  
Mail Code (five digit code assigned by DOJ)

\_\_\_\_\_  
Agency Telephone Number (optional)

**Live can Transaction Completed By:** \_\_\_\_\_ **Name of Operator** **Date:** \_\_\_\_\_

\_\_\_\_\_  
Transmitting Agency ATI No. Amt. Collected/Billed