

Take5 Financial Group

703 S. Glendora Avenue, Suite 6 West Covina, CA 91790

Phone: (626) 569-5944 * Fax: (626) 722-5921

Live Scan Service	State	Federal		Firearms	Application		Rolling Fee
Fingerprint Submission	CORI Fee	CORI Fee	CACI Fee	Eligibility	Initial	Renewal	Service Charge
Employment							
General	\$32	\$17	N/A	N/A	N/A	N/A	\$20
Criminal Justice Agency	\$32	\$0	N/A	N/A	N/A	N/A	\$20
Peace Officer Auxiliary	\$32	\$0	NA	\$19	N/A	N/A	\$20
Peace Officer Firearms w/ CACI	\$32	\$0	\$15	\$19	N/A	N/A	\$20
Human Resource Agency (non-profit)	\$0	\$17	N/A	N/A	N/A	N/A	\$20
In-Home Support Services	\$32	N/A	N/A	N/A	N/A	N/A	\$20
Trustline Registry/CASA	\$32	\$17	\$15	N/A	N/A	N/A	\$20
All other employees are charged the "General" fee							
Volunteer							
HR Agency/Youth Org (non-profit)	\$0	\$15	N/A	N/A	N/A	N/A	\$20
HR Agency/Youth Org (for profit)	\$32	\$15	N/A	N/A	N/A	N/A	\$20
Trustline Registry/CASA (Volunteer)	\$32	\$15	\$15	N/A	N/A	N/A	\$20
Child Day Care (small home)	\$0	\$15	\$0	N/A	N/A	N/A	\$20
Child Day Care (large/facility)	\$42	\$15	\$15	N/A	N/A	N/A	\$20
Foster Care Mentor	\$0	\$15	\$15	N/A	N/A	N/A	\$20
All other volunteers use the "Employment" fee schedule							
Certificates/License/Permits							
General	\$32	\$17	N/A	N/A	N/A	N/A	\$20
Check Casher	\$32	N/A	N/A	N/A	\$50	\$50	\$20
Child Day/Residential (Small home)	\$0	\$17	\$15	N/A	N/A	N/A	\$20
Child Day/Residential (large facility)	\$42	\$17	\$15	N/A	N/A	N/A	\$20
Adult Care/Residential Care	\$42	\$17	N/A	N/A	N/A	N/A	\$20
Custodian of Records	\$32	\$17	N/A	N/A	\$30	N/A	\$20
Fingerprint Roller	\$32	\$17	N/A	N/A	\$25	N/A	\$20
Certificate/License/Permit	\$32	\$17	N/A	N/A	N/A	N/A	\$20
Licen/Permit with Firearm	\$32	\$17	N/A	\$38	N/A	N/A	\$20
Secondhand Dealer/Pawnbroker	\$32	N/A	N/A	N/A	\$300	\$300	\$20
Other							
Application for Visa/Immigration	\$32	N/A	N/A	N/A	N/A	N/A	\$20
Emergency Child Placement	\$0	\$17	N/A	N/A	N/A	N/A	\$20
Petition for Adoption	\$32	\$17	\$15	N/A	N/A	N/A	\$20
Record Review	\$25	N/A	N/A	N/A	N/A	N/A	\$20
POST Training Certificate	\$32	N/A	N/A	\$19	N/A	N/A	\$20
Ombudsman (Employees)	\$32	\$17	N/A	N/A	N/A	N/A	\$20
Ombudsman (Volunteers)	\$32	\$15	N/A	N/A	N/A	N/A	\$20

N/A = Not Applicable

CACI = Child Abuse Central Index

CASA = Court Appointed Special Advocate

* CASA CACI checks available 01/01/08 and are permissive, not mandatory



REQUEST FOR LIVE SCAN SERVICE Applicant Submission

(License, Certification, Permit Only, or Business Partner Automation Program Participant)

To verify your identity, please bring an official governmental photo document (e.g., driver license, identification card, passport, etc.) with you to the live scan site. Processing fees are non-refundable.

Please read instructions on reverse before completing form.

1. CODE ASSIGNED BY DOJ
ORI: A0059

APPLICANT COMPLETES (EXCEPT ITEM 15) — PLEASE PRINT.

2. CHECK APPROPRIATE BOX (SEE REVERSE FOR INSTRUCTIONS)

A. Department of Motor Vehicles
Licensing Operations Division
Occupational Licensing Branch
P. O. Box 932342 MS—L224
Sacramento, CA 94232-3420

Five Digit Mail Code: 04620

Contact: Operations Manager
916-229-3153

Ambulance Driver Certificate Only

B. Department of Motor Vehicles
Licensing Operations Division
Issuance, Commercial Driver License
P.O. Box 942890
Sacramento, CA 94232-3420

Five Digit Mail Code: 04621

Contact: CDL/PDPS Manager
916-657-5771

3. TYPE OF APPLICATION (ONLY IF CHECKING BOX "A" ABOVE) — Check One

License Certification Permit Business Partner Automation Program Participant
 Employer Testing Program Examiner

4. APPLICANT'S NAME (LAST, FIRST, MIDDLE INITIAL)

5. AKAS (LAST, FIRST)

ADDITIONAL AKAS (LAST, FIRST)

6. DATE OF BIRTH	7. SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	8. HEIGHT	9. WEIGHT	10. EYE COLOR	11. HAIR COLOR
12. PLACE OF BIRTH			13. SOCIAL SECURITY NUMBER		
14. CALIFORNIA DRIVER LICENSE/IDENTIFICATION NUMBER		15. NO BILLING NUMBER—APPLICANT PAYS		16. MISCELLANEOUS NUMBER	
17. HOME ADDRESS AND TELEPHONE NUMBER		STREET	CITY	STATE	ZIP CODE TELEPHONE NUMBER

DMV COMPLETES

18. YOUR NUMBER (OCA NUMBER—AGENCY IDENTIFYING NUMBER) OLAD	19. IF RESUBMISSION, LIST ORIGINAL ATI NUMBER	20. LEVEL OF SERVICE <input checked="" type="checkbox"/> DOJ <input type="checkbox"/> FBI
---	---	--

LIVE SCAN OPERATOR COMPLETES

21. OPERATOR COMPLETING LIVE SCAN TRANSACTION		22. DATE	
23. TRANSMITTING AGENCY (LSID NUMBER) TAKES5 FINANCIAL GROUP 703 S GLENDORA AVENUE, STE 6, WEST COVINA, CA 91790		24. ATI NUMBER	25. AMOUNT COLLECTED 26. AMOUNT BILLED

DISTRIBUTION: ORIGINAL - Live Scan Operator
SECOND COPY - Requesting Agency
THIRD COPY - Applicant