**Client Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FBI** (Rolled Ink on Card)

& **DOJ** (Livescan)

**AMERIPRINT – SANTA ROSA**

**2675 Cleveland Ave #7**

**Santa Rosa, Ca. 95403**

[**(707)566-1929**](dialpad://(707)566-1929)

**AMERIPRINT – PETALUMA**

**963 Transport Way #4**

**Petaluma, Ca. 94954﻿**

[**(707)588-9866**](dialpad://(707)588-9866)

**AMERIPRINTS – ROHNERT PARK**

**5685 Redwood Dr. Ste 101**

**Rohnert Park, CA. 94928**

[**(707)588-9866**](dialpad://(707)588-9866)

[**WALK-INS WELCOME**](http://www.ameriprints.com/locations/)

**MON-FRI 9AM - 6PM**

**SAT 10AM - 3PM**

**\_\_\_\_\_\_ DOJ** - **LIVESCAN**

**\_\_\_\_\_\_ 1 FBI Fingerprint Card: *(please electronic submission requested if possible)***

**NOTE: PLEASE ONLY USE OUR OFFICE ADDRESS TO SEND THE REPORT. PLEASE DO NOT USE OUR CLIENT’S ADDRESS *(This is to secure our client’s privacy)* THANK YOU.**

\_\_\_\_\_\_**Note to client:** A $20 fee will be added to your billing account to cover FBI processing fee.

**Noticia al cliente:** Este proceso requiere un pago al FBI para procesamiento, usted vera la cantidad de $20 agregado a su estado de cuenta/bill.