



A1104
ORI (Code assigned by DOJ)

LICENSE CERT OR PERMIT
Authorized Applicant Type

ATTORNEY LICENSE

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned.)

Contributing Agency Information:

THE STATE BAR OF CALIFORNIA

Agency Authorized to Receive Criminal Record Information

Mail code (five-digit code assigned by DOJ)

845 S. FIGUEROA STREET

Contact Name (mandatory for all school submissions)

Street Address or P. O. Box

LOS ANGELES **CA** **90017**

Contact Telephone Number

City State Zipcode

Applicant Information:

Last Name First Name Middle Initial Suffix

Other Name

First Name Middle Initial Suffix

(AKA or Alias) Last Name

Date of Birth Sex Male Female

Driver's License Number

Height Weight Eye Color Hair Color

APPLICANT MUST PAY AT LIVE SCAN SITE

Billing Number Agency Billing Number

Place of Birth (State or Country) Social Security Number

Misc Number Other Identification Number

Home Address Street Address or P.O. Box

City State Zipcode

[Must be obtained via My State Bar Profile](#)

Level of Service: DOJ FBI

Your Number: _____
OCA Number (Agency Identifying Number / CAL BAR#)

Original ATI Number

If re-submission, list original ATI number:(Must provide proof of rejection) >

Employer (Additional response for agencies specified by statute):

THE STATE BAR OF CALIFORNIA

Mail code (five-digit code assigned by DOJ)

Employer Name

845 S. FIGUEROA STREET

Street Address or P. O. Box

LOS ANGELES **CA** **90017**

Telephone Number (optional)

City State Zipcode

Live Scan Transaction Completed By:

Name of Operator Date

Transmitting Agency LSID ATI Number Amount Collected/Billed

Live Scan Form Check List

When completing the form you must provide the following:

- ✓ **Height** - Express in feet and inches. Do not use fractions. Round off to the nearest inch. (Example – 5’11” or 6’0”)

- ✓ **Weight** - Express in pounds. Do not use fractions. Round off to the nearest pound.
- ✓ **Eye Color** - Black - BLK, Blue – BLU, Brown – BRN, Gray – GRY, Green – GRN, Hazel – HAZ, Maroon – MAR, Pink – PNK

- ✓ **Hair Color** – Bald – BAL, Black – BLK, Blond or Strawberry – BLN, Brown – BRN Gray/ partially – GRY Red or Auburn – RED, Sandy – SDY White - WHI

- ✓ **Place of Birth**- Enter city, state, and country
- ✓ **Social Security** - Is the social security number incorrect? If so, contact the State Bar to request an updated Live Scan form.
- ✓ **Address** – Enter home address.

Please note: The DOJ Live Scan process requires the “Employer” section of the form to indicate “The State Bar of California”. Do not modify this section. *Please contact The State Bar, if your personal information is inaccurate or missing.*

Live Scan Form Technician Check List

Review this check list with your Live Scan technician. Confirm technician has accurately entered the following information into the Live Scan program:

- ✓ ORI - A1104
- ✓ Authorized Applicant Type: LICENSE CERT OR PERMIT
- ✓ Type of License: ATTORNEY LICENSE
- ✓ Mail Code: 22506
- ✓ Correct Social Security Number and Date of Birth
- ✓ OCA # (if populated)
- ✓ Completes the bottom of your Live Scan form and provides a legible ATI number, see image below.

Live Scan Transaction Completed By:

Name of Operator				Date			
Transmitting Agency		LSID		ATI Number		Amount Collected/Billed	

Submit Proof of Live Scan Check List

- ✓ **Retain a copy of the signed Live Scan Form.** Ask the technician about their fingerprint rejection policy. Confirm that you can return to the vendor and resubmit your fingerprints, if your fingerprints are rejected by the DOJ.
- ✓ **Retain the ATI number.** Return to your My State Bar Profile and select the Fingerprinting Rule

Compliance Documents link to submit proof of Live Scan using your ATI number.