My FBI Report

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FBI CRIMINAL REPORT REQUEST

PRIVACY ACT STATEMENT

The FBI's acquisition, retention, and sharing of information submitted on this form is generally authorized under 28 USC 534 and 28 CFR 16.30-16.34. The purpose for requesting this information from you is to provide the FBI with a minimum of identifying data to permit an accurate and timely search of criminal history identification records. Providing this information (including your Social Security Account Number) is voluntary; however, failure to provide the information may affect the completion of your request. The information reported on this form may be disclosed pursuant to your consent, and may also be disclosed by the FBI without your consent pursuant to the Privacy Act of 1974 and all applicable routine uses.

Applicant Information

*** Denotes Required Fields**

*** Last Name**
*** First Name**
Middle Name 1
Middle Name 2
*** Date of Birth**
Last Four Digits of Social Security Number

Applicant Home Address

*** Address**	
*** City**	*** State**
*** Postal (zip) code**	
*** Country**	
*** U.S. Citizen or Legal Permanent Resident** ☐ Yes ☐ No (If no, you **must** make your request directly with the FBI)	
Country of Citizenship	Country of Residence
*** Phone Number**	
*** Email Address**	

Mail Results to This Address (Attorney Only)

C/O	ATTN
Address	
City	State
Postal (zip) code	Country
Phone Number (if different from above)	

*** FBI Criminal Report** Includes one copy $ 80.00

*** Shipping** Select one Shipping Option $ 0.00

*** Additional Copies** _____ **@ $9.00 each** $ 0.00
Quantity

*** Total Payment Enclosed** $ 80.00

*** Shipping Options** Please check one box

☐ USPS First Class Mail – **No charge**

☐ USPS Priority Mail (2-3 Day Delivery) – **$14.00**

☐ FedEx (Overnight Delivery) – **$40.00**

*** Payment Type** Please check one box

☐ Cashier's Check ☐ Money Order ☐ Credit Card (Include Credit Card Authorization form)

*** Reason for my request** Please check one box

☐ Personal Review/Correction ☐ Work Visa/Student Visa ☐ Foreign Residency/Travel

☐ Adoption ☐ Attorney Request ☐ Other (please specify) _____

*** APPLICANT SIGNATURE** _____ *** DATE** _____

**** Signed Criminal Background Check Disclaimer must be included with order. You may request a copy of your own identification record to review it or obtain a change, correction, or an update to the record.***

****Pricing does include fingerprint rolling fees for mailing ink cards, or live scan fees for electronic submissions.**

MFR-CRR-1610

National Credit Reporting

CLEAR FORM

My FBI Report

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FBI Criminal Report Request
Criminal Background Check Disclaimer

I declare under penalty of perjury under the laws of the United States of America that the enclosed fingerprint impression is that of the person completing this form, and that all of the information submitted on the **FBI Criminal Report Request** form is true and correct.

Applicant acknowledges that information sent through electronic mail, United States Mail, and courier service is not secure. Applicant further acknowledges that NCR may not alter any of the information contained in the FBI report, even if there are obvious errors. Applicant waives, disclaims, and holds NCR harmless from and against any inadvertent disclosure of Applicant's FBI report and from any inaccuracies contained within said FBI report, provided that nothing herein affects any intentional, wrongful disclosure of Applicant's FBI report or the contents thereof.

Applicant's Name _____

Signature _____

Date _____

MFR-MC-1610

CLEAR FORM