

**Secureone, Inc.**  
4701 W Midlothian Turnpike, Suite 2  
Crestwood, IL 60445

## **UCIA Fingerprint Request**

Please Print Clearly:

Last Name: \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_

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

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_

Phone # (\_\_\_\_) \_\_\_\_\_

### **Requester Information – Results will be sent here:**

Name: _____
Company/Agency Name: _____
Address _____
City _____ State _____ Zip Code _____

I, the undersigned, hereby authorize the release of any criminal history record information that may exist regarding me from any agency organization, institution, or entity having such information on file. I authorize Secureone Inc. to capture and transmit my fingerprints to the Illinois State Police (ISP) and/or Federal Bureau of Investigation (FBI) for the purpose of checking my criminal history record information. I understand that my prints may be retained by the State Police and/or FBI pursuant to applicable statute. I understand that if my prints are AFIS unacceptable and reprinting is necessary to receive results, the customer is required to pay the reprint fee.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

TCN # LS11127 \_\_\_\_\_

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Fax (708) 687-6019  
Email – Illinois@secureone.us