

A Nationally Accredited Educational Service Center

Lori Snyder-Lowe, Superintendent

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Date:
From:
(Bill to)
Bill to Email:
Please perform a background check(s) for the following individual and bill our Organization for the following:
\$35 for Ohio BCI
\$35 for FBI
\$65 for both BCI & FBI
The reason for the background check(s) are the following:
BCI Ohio Revised Reason Code:
FBI Reason Code:
Individual to be fingerprinted:
Authorized Signature:
Title: