

Rebecca Martinez, County Clerk-Recorder and Registrar of Voters

Process Server Registration Application Instructions

To complete the registration process, you must do the following:

- 1. Complete and sign the registration form.
- 2. Obtain a bond in the amount of \$2,000 as required under Business & Professions Code 22353(c). Your registration will expire 2 years from date of your filing or the date of expiration of your bond, whichever occurs first.
- 3. Applicant must be have a background check performed via LiveScan. In Madera County, the Sheriff's office will provide this service:

Madera County Sheriff 2725 Falcon Drive Madera CA 93637 (559) 675-7770

- 4. Effective 01/01/2020, photos will be taken at the County Clerk's office at the time of filing.
- 5. Provide valid photo identification
- 6. Provide payment of all fees**:
 - a. Clerk fees: \$107.00
 - b. Recording fees: \$14.00 for the first page and \$3.00 for each additional page of bond (may require additional cover page)
 - c. Additional ID card: \$10.00 each
- 7. Personally bring all of the above to the Madera County Clerk-Recorder's Office located at 200 W. 4th Street, Madera CA 93637. Registration forms are accepted Monday-Friday, from 8:00 a.m. to 3:30 p.m., please call to schedule an appointment.

^{**}Acceptable forms of payment include cash (\$100.00 bills will not be accepted), check, debit or credit cards. Debit and credit transactions will be charged an additional convenience fee. Please make checks payable to MADERA COUNTY CLERK-RECORDER.



Applicant Submission					
A1551			LICENSE		
ORI (Code assigned by DOJ)			Authorized A	pplicant Type	
PROCESS SERVER Type of License/Certification/Permit	OR Working Title	Maximum 20 abarastam	if assigned by DO Lu	no event title engigened)	
Contributing Agency Information:		(Maximum 50 characters	- It assigned by DO3, as	se exact title assigned)	
MADERA COUNTY CLERK			07240		
Agency Authorized to Receive Criminal F	***	Mail Code (five-digit code assigned by DOJ)			
200 W. 4TH STREET			REBECCA MARTINEZ		
Street Address or P.O. Box			Contact Name (mandatory for all school submissions)		
MADERA	CA	93637	(559) 675-7724 Contact Telephone Number		
City	State	ZIP Code	Contact Telep	hone Number	
Applicant Information:					
Last Name			First Name		Middle Initial Suffix
Other Name: (AKA or Alias)					
Last Name			First Name		Suffix
Sex	Male F	emale			
Date of Birth			Driver's Licen	se Number	
			Billing Number		
Height Weight	Eye Color	Hair Color	(Ager	ncy Billing Number)	
Place of Birth (State or Country)	Social Security Nu	ımber	Misc. Number		
			CONTRACTOR OF THE	Identification Number)	3
Home Address Street Address or P.O. Box		=======================================	City		State ZIP Code
Address Street Address or P.O. Box			Oity		5000
I have received and re	ead the included	d Privacv Notice.	Privacy Act St	atement, and Applica	ant's Privacy Rights.
		,	,	7.1	, , ,
8	Applicant Signati	ure			Date
					TV EDI
Your Number: OCA Number (Agency Iden	tifuin a Number	 8	Level of Se		X FBI
OCANumber (Agency Iden	mying ramber)			record information of the	fingerprints will be used to check the FBI.)
If re-submission, list original ATI	number:				
(Must provide proof of rejection)		al ATI Number			
Employer (Additional response for	or agencies spe	ecified by statute):		
Employer (, taalileria, respense is	or agonolog ope	somed by clarate	,··		
Employer Name					
Street Address or P.O. Box				Telephone Number (optional)
City		State	ZIP Code	Mail Code (five digit a	code assigned by DOJ)
Live Scan Transaction Complete	d By:	J. 100		Sodo (iivo digit i	
Name of Operator			Date		
T	LOID		ATINI		Amount Called at 1000
Transmitting Agency	LSID		ATI Number		Amount Collected/Billed

Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information. The California Justice Information Services (CJIS) Division in the Department of Justice (DOJ) collects the information requested on this form as authorized by Business and Professions Code sections 4600-4621, 7574-7574.16, 26050-26059, 11340-11346, and 22440-22449; Penal Code sections 11100-11112, and 11077.1; Health and Safety Code sections 1522, 1416.20-1416.50, 1569.10-1569.24, 1596.80-1596.879, 1725-1742, and 18050-18055; Family Code sections 8700-87200, 8800-8823, and 8900-8925; Financial Code sections 1300-1301, 22100-22112, 17200-17215, and 28122-28124; Education Code sections 44330-44355; Welfare and Institutions Code sections 9710-9719.5, 14043-14045, 4684-4689.8, and 16500-16523.1; and other various state statutes and regulations. The CJIS Division uses this information to process requests of authorized entities that want to obtain information as to the existence and content of a record of state or federal convictions to help determine suitability for employment, or volunteer work with children, elderly, or disabled; or for adoption or purposes of a license, certification, or permit. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The DOJ's general privacy policy is available at http://oag.ca.gov/privacy-policy.

Providing Personal Information. All the personal information requested in the form must be provided. Failure to provide all the necessary information will result in delays and/or the rejection of your request.

Access to Your Information. You may review the records maintained by the CJIS Division in the DOJ that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information. In order to process applications pertaining to Live Scan service to help determine the suitability of a person applying for a license, employment, or a volunteer position working with children, the elderly, or the disabled, we may need to share the information you give us with authorized applicant agencies.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such as for investigations or for licensing, certification, or regulatory purposes.
- To another government agency as required by state or federal law.

Contact Information. For questions about this notice or access to your records, you may contact the Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at keeperofrecords@doj.ca.gov, or by mail at:

Department of Justice
Bureau of Criminal Information & Analysis
Keeper of Records
P.O. Box 903417
Sacramento, CA 94203-4170

Privacy Act Statement

Authority. The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose. Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses. During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental, or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Noncriminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification₁ that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record. 3

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council. 4

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at https://www.fbi.gov/services/cjis/identity-history-summary-checks.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) *You can find additional information on the FBI website at* https://www.fbi.gov/about-us/cjis/background-checks.

Written notification includes electronic notification, but excludes oral notification

² https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

³ See 28 CFR 50.12(b)

⁴ See U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c)



CERTIFICATE OF REGISTRATION PROCESS SERVER

Instructions: Please **TYPE** or **PRINT** legibly and firmly in BLACK ink. Neither the County Clerk nor his/her deputies are permitted by law to give legal advice and/or assistance. This filing will be a public record and there are no refunds.

Clerk Filing Fees:

Filing Registration: \$100.00 Filing Bond: \$7.00 Additional ID card: \$10.00

Additional Recorder Fees:

Bond - first page: \$14.00 Each additional Page(s): \$3.00/per page or side

Type of Filing: New Renewal

If a renewal, enter previous registration number:

If a renewal, a new registration number must be assigned if there is a lapse of three of more years in the period of registration. The date of expiration is two years from the date of filing OR the date the bond expires, whichever occurs first.

Registrant is An Individual A Corporation

(select one): A Partnership

Provide all Registrant Information below:

Registrant Full Name

Age

Corporation/Partnership Name (if applicable)

Address					
City, State					
Zip Code					
Email Address					
Telephone					
For County Clerk Staff only:					
ID verified?	Yes No				
Type of ID presented:					
The undersigned, hereby certific	es/declares that:				
1. As an INDIVIDUAL,	I have NOT been convicted of a felony.				
	I have been convicted of a felony, attach a copy of the certificate of Rehabilitation, Expungement or Pardon.				
2. As an INDIVIDUAL, I have re the filing of this certificate.	esided in this State for a period of one year immediately preceding				
3. Said INDIVIDUAL will perforn provisions of law governing the	n his/her/their duties as a process server in compliance with the service of process in this State.				
As a CORPORATION or PARTI	NERSHIP, the corporate officers or general partners declare that:				
1. The officers/partners	have NOT been convicted of a felony.				
	have been convicted of a felony, attach a copy of the certificate of Rehabilitation, Expungement or Pardon.				
	NERSHIP, the corporation or partnership has been organized and d of one year immediately preceding the filing of this certificate OR				
	a responsible managing employee, partner, or officer has been previously registered under this chapter.				

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3. Said corporation or partnership will perform his/her/their duties as a process server in compliance

with the provisions of law governing the service of process in this State.

List the names, ages, addresses, and telephone numbers of the corporate officers or genera partners (use extra sheets if necessary):					
1. Name					
1. Age					
1. Address					
1. City & State					
1. Zip Code					
1. Email Address					
1. Telephone					
2. Name					
2. Age					
2. Address					
2. City & State					
2. Zip Code					
2. Email Address					
2. Telephone					
Each of the following declares under penalty of perjury under the laws of the State of California that the foregoing is true and correct to the best of their knowledge.					
Executed at (Place)					
Date					
Signature					
Signature					

(PRINT FORM AND SIGN)