



**SELECT
INFORMATION
SERVICES INC.**

"Specialized Information Gathering"

AUTHORIZATION FOR SERVICES

Requesting Client: **Our Lady of Mount Carmel**

Contact: Jennifer Santani **Phone:** 480-344-5228 **Date:** 7/6/07

Person to be printed:

Name _____ **DOB** _____

Phone _____ **Social Security #** _____

Fingerprints will be processed by Select Information Services.

Select Information Services will bill Mount Carmel

NO APPOINTMENT NECESSARY

- **PHOTO ID REQUIRED**

PREFERRED SUPPORT SERVICES

54 S. CENTER
MESA, AZ 85210
(Between 1st Ave and Main St. on Center)
Tel & Fax (480) 835-6676
M-F 8:30-4:30