

**THIS FORM MUST BE TYPED**

OFI FORM 86C  
 NOVEMBER 1990  
 EXCEPTION APPROVED BY OPM 11-94

U.S. OFFICE OF PERSONNEL MANAGEMENT  
 OFFICE OF FEDERAL INVESTIGATIONS

**SPECIAL AGREEMENT CHECKS (SAC)**

AGENCY AGREEMENT NUMBER <b>94-01</b>		OPM USE ONLY		OPM CODES		CASE NUMBER	
<b>1. SUBJECT'S FULL NAME</b>						<b>2. DATE OF BIRTH</b>	
LAST NAME		FIRST NAME		MIDDLE NAME		MONTH / DAY / YEAR	
<b>3. PLACE OF BIRTH (USE THE TWO LETTER CODE FOR THE STATE)</b>					<b>4. SOCIAL SECURITY NUMBER</b>		
CITY		COUNTY		STATE	COUNTRY (IF NOT IN THE UNITED STATES)		
<b>5. OTHER NAMES USED AND DATES WHEN USED</b>							
NAME		MONTH/YEAR TO MONTH/YEAR		NAME		MONTH/YEAR TO MONTH/YEAR	
NAME		MONTH/YEAR TO MONTH/YEAR		NAME		MONTH/YEAR TO MONTH/YEAR	
<b>6. SEX (MARK ONE BOX)</b>  FEMALE                  MALE		<b>7. SPECIAL AGREEMENT CODES</b>  <b>R</b>		<b>8. POSITION TITLE</b>			
<b>9. SON</b>	<b>10. SOI</b>	<b>11. OPAC-ALC NUMBER</b>		<b>12. ACCOUNTING DATA</b>			
<b>13. OTHER INFORMATION REQUIRED BY AGREEMENT CHECK ANY REQUIRED BLOCKS BELOW AND CONTINUE TO PAGE 2</b>							
(CODE E) CREDIT RECORD		(CODE F) SELECTIVE SERVICE RECORD		(CODE G) MILITARY PERSONNEL RECORD			
(CODE I) IMMIGRATION AND NATURALIZATION SERVICE RECORD				(CODE N) BUREAU OF VITAL STATISTICS RECORD			
14. REQUESTING OFFICIAL, NAME AND TITLE <b>Chris Mullane Security Assistant</b>		SIGNATURE			TELEPHONE NUMBER (Including area code) <b>(303) 497-3943</b>		DATE