

1 XAVIER BECERRA
Attorney General of California
2 ANTHONY R. HAKL
Supervising Deputy Attorney General
3 NELSON R. RICHARDS
Deputy Attorney General
4 State Bar No. 246996
1300 I Street, Suite 125
5 P.O. Box 944255
Sacramento, CA 94244-2550
6 Telephone: (916) 210-7867
Fax: (916) 324-8835
7 E-mail: Nelson.Richards@doj.ca.gov
Attorneys for Defendant Attorney General
8 *Xavier Becerra*

9 IN THE UNITED STATES DISTRICT COURT
10 FOR THE SOUTHERN DISTRICT OF CALIFORNIA

11
12
13 **KIM RHODE et al.,**

14 Plaintiffs,

15 **v.**

16
17 **XAVIER BECERRA, IN HIS OFFICIAL**
18 **CAPACITY AS ATTORNEY GENERAL OF**
THE STATE OF CALIFORNIA, et al.,

19 Defendants.

3:18-cv-00802-BEN-JLB

**FOURTH SUPPLEMENTAL
DECLARATION OF MAYRA G.
MORALES IN SUPPORT OF
DEFENDANT XAVIER
BECCERRA'S OPPOSITION TO
PLAINTIFFS' MOTION FOR
PRELIMINARY INJUNCTION**

20 Dept: 5A
Judge: Hon. Roger T. Benitez
21 Action Filed: 4/27/2018
22
23
24
25
26
27
28

FOURTH SUPPLEMENTAL DECLARATION OF MAYRA G. MORALES

I, MAYRA G. MORALES, declare:

1. I am a Staff Services Manager III for the California Department of Justice, Bureau of Firearms (hereafter generally referred to together as the “Department”). I make this declaration of my own personal knowledge and experience and, if called as a witness, I could and would testify competently to the truth of the matters set forth herein.

2. To date, I have prepared four declarations for submission to the Court:

- The August 5, 2019 Declaration of Mayra G. Morales in Support of Defendant Xavier Becerra’s Opposition to Plaintiffs’ Motion for Preliminary Injunction, ECF No. 34-1;
- The September 27, 2019 Supplemental Declaration of Mayra G. Morales in Support of Defendant Xavier Becerra’s Opposition to Plaintiffs’ Motion for Preliminary Injunction, ECF No. 42;
- The November 18, 2019 Second Supplemental Declaration of Mayra G. Morales in Support of Defendant Xavier Becerra’s Opposition to Plaintiffs’ Motion for Preliminary Injunction, ECF No. 48; and,
- The February 28, 2020 Third Supplemental Declaration of Mayra G. Morales in Support of Defendant Xavier Becerra’s Opposition to Plaintiffs’ Motion for Preliminary Injunction, ECF No. 53.

3. This fourth supplemental declaration answers a question that the Court directed me to answer during the April 1, 2020, telephonic status conference. The Court asked me whether there is a process for a person to challenge a Department determination that he or she is prohibited from purchasing ammunition—for instance, whether a person who has a Standard Ammunition Eligibility Check (Standard Check) denied because he or she is prohibited can challenge the

1 Department's determination. *See* Apr. 1, 2020, Status Conference Tr. at 68:23-
2 69:6.

3 4. In answer to the Court's question: Yes, there is a procedure that a person
4 may use to contest a determination by the Department that he or she is prohibited.
5 As part of my job duties, I am generally aware of the first steps in that procedure.
6 My job duties do not, however, require me to participate in the procedure.

7 5. A person who has an ammunition eligibility check denied because
8 Department records show that he or she is prohibited from possessing firearms and
9 ammunition will be notified via letter. A true and correct copy of an example letter
10 denying a Standard Check is attached to this declaration as **Exhibit A**. A true and
11 correct copy of an example letter denying a Basic Ammunition Eligibility Check
12 (Basic Check) is attached to this declaration as **Exhibit B**.

13 6. The letter received by Standard Check purchasers does not provide the
14 specific reason the person is prohibited. *See* Ex. A. This is because Standard
15 Checks rely on the Armed Prohibited Person System (APPS) to determine whether
16 the purchaser is prohibited from possessing ammunition by way of checking the
17 person's status in APPS, which is either prohibited or not prohibited.

18 7. The letter received by Basic Check purchasers provides that information.
19 *See* Ex. B. That information is available because Basic Check denials involve
20 manual review by a Department analyst that entails ascertaining the reason the
21 person is prohibited.

22 8. Both letters inform the purchaser that "if you wish to challenge the
23 Department's determination or the correctness of your criminal history record,
24 please complete a Request for Live Scan Service form," and provide a form number
25 and web address for where the form can be obtained. *See* Exs. A, B. A true and
26 correct copy of the Request for Live Scan Service – Firearms Eligibility form (BOF
27 8016RR), which is the form that those who are denied in a Standard Check are
28 directed to use, is attached to this declaration as **Exhibit C**. A true and correct copy

1 of the Request for Live Scan Service – Ammunition Eligibility form (BOF
2 8016ARR), which is the form that those who are denied in a Basic Check are
3 directed to use, is attached to this declaration as **Exhibit D**.

4 9. Two different forms are used because denials under the two checks have
5 slightly different scopes. As noted above, a person denied in a Standard Check is
6 denied because the APPS system lists him or her as prohibited. This person could
7 be denied because either state or federal records, or both, show him or her to be
8 prohibited. The APPS system pulls from the same state databases as the Basic
9 Check described in my earlier declarations to determine whether a person is
10 prohibited. *See, e.g.*, Third Supp. Decl. ¶ 8, ECF No. 53. But it also relies on the
11 federal National Criminal Background Check System (NICS), because APPS is
12 used to identify prohibited people who are in possession of firearms. In this sense,
13 the Standard Check relies on the same information relied on in a firearms
14 background check. As a result, those who are denied on a Standard Check can use
15 the same form (BOF 8016RR) to request information from their record as those
16 who have been denied as prohibited from purchasing a firearm.

17 10. The Basic Check, on the other hand, does not rely on NICS. Thus, a
18 person who is denied under a Basic Check is denied because state records (and not
19 federal records) show him or her to be prohibited. The check relies on the four state
20 databases described in my earlier declarations. *See, e.g.*, Third Supp. Decl. ¶ 8,
21 ECF No. 53. The Department requests those denied under a Basic Check to use a
22 different form (BOF 8016 ARR) to reflect the difference in the records that will be
23 reviewed and supplied to the requestor.

24 11. Both forms are part of the same process.

25 12. A denied purchaser who desires that information can take his or her
26 completed form to a Live Scan operator, who will fingerprint the denied purchaser
27 and electronically submit the form to the Bureau of Criminal Information and
28 Analysis (BCIA) Record Review Unit and thereafter the Bureau of Firearms. Once

1 the request is complete, the Department sends a copy of the findings to the denied
2 purchaser along with a copy of a challenge form to dispute all inaccurate
3 information. A true and correct copy of the challenge form, which is designated as
4 Claim of Alleged Inaccuracy or Incompleteness (BCIA 8706), is attached to this
5 declaration as **Exhibit E**.

6 13. The challenge form's subtitle reads "Examination of Records Pursuant to
7 Penal Code Section 11120-11127." Ex. E. and it informs the filer how to request
8 an administrative hearing. *Id.*

9 14. Beyond what I have described above, I do not have personal knowledge
10 of the process.

11
12 Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing
13 is true and correct.

14
15 Executed on: April 10, 2020

16
17 
18 MAYRA G. MORALES

Exhibit A

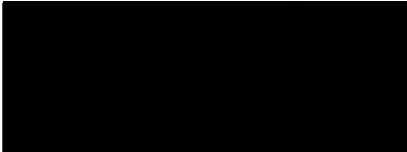
XAVIER BECERRA
ATTORNEY GENERAL

State of California
DEPARTMENT OF JUSTICE



BUREAU OF FIREARMS
P.O. BOX 820200
SACRAMENTO, CA 94203-0200
Telephone: (916) 210-2600
Fax: (916) 227-4808

April 07, 2020



RE: Purchaser Prohibited

Dear 

You recently applied to purchase or transfer ammunition. This letter is to advise you that the purchase has been denied because the Department of Justice (the Department) records indicate you are not eligible to own or possess ammunition. If you wish to challenge the accuracy of the Department's determination or the completeness of your criminal history record, please complete a Request for Live Scan Service form (BOF 8016RR) located on the Bureau of Firearms web page at <https://oag.ca.gov/firearms>.

Sincerely,

ARMED AND PROHIBITED PERSONS SECTION
Bureau of Firearms

For **XAVIER BECERRA**
ATTORNEY GENERAL

Exhibit B

XAVIER BECERRA
Attorney General

State of California
DEPARTMENT OF JUSTICE



BUREAU OF FIREARMS
P.O. BOX 820200
SACRAMENTO, CA 94203-0200
Telephone: (916) 227-7527
Fax: (916) 227-3744

March 25, 2020

RE: Ammunition Denial

Dear [REDACTED]:

You recently applied to purchase or transfer ammunition. When a person applies to purchase or transfer ammunition in California, the California Department of Justice (the Department) is required by state laws to examine its records to determine whether the purchaser is eligible under state law to purchase and possess ammunition. Your recent ammunition purchase application is being denied because the Department's review of state records matching your identifying information revealed the following information:

Felon: Any person who has been convicted of a felony under the laws of the United States, of the State of California, or of any other state, government, or country.

This determination was based upon information you provided in your application to purchase ammunition, such as your name, date of birth, driver license number and physical description, but has not been confirmed with fingerprint comparison. It is possible that the criminal record may not be yours and may belong to another individual whose name and identifying information is similar to yours.

If you wish to challenge the accuracy of the Department's determination or the completeness of your criminal history record, please complete a Request for Live Scan Service form (BCIA/BOF 8016ARR) located on the Bureau of Firearms web page at <http://oag.ca.gov/firearms>.

FIREARMS CLEARANCE SECTION
Bureau of Firearms

For **XAVIER BECERRA**
Attorney General

Exhibit C



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

AB165

ORI (Code assigned by DOJ)

FIREARMS RECORD REVIEW

Authorized Applicant Type

FIREARMS ELIGIBILITY

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

CALIFORNIA DEPARTMENT OF JUSTICE - RECORD REVIEW UNIT

Agency Authorized to Receive Criminal Record Information

RECORD REVIEW UNIT

Contact Name (mandatory for all school submissions)

P.O. BOX 903417

Street Address or P.O. Box

SACRAMENTO

City

CA 94203-4170

State ZIP Code

Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name
(AKA or Alias) Last

First

Suffix

Date of Birth

Sex ☐ Male ☐ Female

Driver's License Number

Height

Weight

Eye Color

Hair Color

Billing

Number **APPLICANT TO PAY FEES**

(Agency Billing Number)

Misc.

Number

(Other Identification Number)

Place of Birth (State or Country)

Social Security Number

Home

Address Street Address or P.O. Box

City

State

ZIP Code

Your Number:

OCA Number (Agency Identifying Number)

Level of Service: ☒ DOJ

If re-submission, list original ATI number:
(Must provide proof of rejection)

Original ATI Number

Designee (Optional for individual designated by applicant pursuant to Penal Code section 11124):

Designee Name

Telephone Number (optional)

Street Address or P.O. Box

City

State

ZIP Code

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed



REQUEST FOR LIVE SCAN SERVICE (Instructions)

California Penal Code sections 11120 through 11127, and 30105 allows you to obtain a copy of your record, if any, contained in the files of the California Department of Justice and refute any erroneous or inaccurate information contained therein.

Beginning with live scan transactions submitted after April 6, 2006, the Department of Justice (DOJ) will only mail responses to you unless you complete the Designee portion on page 1 pursuant to Penal Code section 11124.

You may use the information you receive to answer questions regarding past criminal history, firearms eligibility, or to complete an application or questionnaire. However, no person or agency may require you to obtain a copy of your record or to furnish the information for any purpose, including immigration, visa, employment, licensing, or certification. (See California Penal Code sections 11125 and 30105.)

INSTRUCTIONS FOR COMPLETING THE "REQUEST FOR LIVESCAN SERVICE"

CATEGORY	INSTRUCTIONS	COMMENTS
Authorized Applicant Type:	Verify "Firearms Record Review" appears.	This is a mandatory field and must be completed.
Name of Applicant & Personal Descriptors:	Enter your full name, any known alias, date of birth, sex, height, weight, eye & hair color, place of birth, social security number and California driver's license number.	Name, date of birth, and sex are mandatory fields and must be provided. All others are optional.
Applicant Address:	Enter your home address.	This is a mandatory field and must be completed.
Daytime Telephone Number:	Enter the telephone number, including area code, where you can be reached between 8 a.m. and 5 p.m.	A telephone number is useful in helping to resolve problems which could result in a delay in processing your request.

AFTER COMPLETING THE "REQUEST FOR LIVE SCAN SERVICE" FORM

- Check your local telephone directory or contact your local police department or sheriff's office for a business or local law enforcement agency that offers "Live Scan" fingerprinting services, the fee charged by the business/agency for the Live Scan service, and the types of payment accepted. You can also view a current listing of Live Scan sites offering electronic fingerprinting services on the Attorney General's website at: <https://oag.ca.gov/fingerprints/locations>
- Go to the Live Scan business/agency of your choice to have your fingerprints taken and pay all applicable fees, including the fingerprint rolling fee. Please ensure that any private fingerprinting service you select is certified by the California Department of Justice.
- If you have questions about completing the "Request for Live Scan Service" form (BOF 8016RR), please contact the Record Review Unit at (916) 227-7527.



REQUEST FOR LIVE SCAN SERVICE

Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information: The Division of Law Enforcement, Bureau of Firearms in the Department of Justice collects the information on this request pursuant to Penal Code sections 11122 and 11123. The Bureau of Firearms uses this information to process a person's request to obtain a copy of their criminal history record. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The Department of Justice's general privacy policy is available at <https://oag.ca.gov/privacy-policy>.

Providing Personal Information: All personal information on this request is mandatory. Failure to provide the mandatory personal information will result in your request not being processed.

Access to Your Information: You may review the records maintained by the Division of Law Enforcement, Bureau of Firearms in the Department of Justice 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 a person's request to obtain a copy of their criminal history record, we may need to share the information you provide us with any Bureau of Firearms representative or any other person designated by the Attorney General upon request. The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies when necessary to perform their legal duties, and their use of information is compatible and complies with state law, such as for investigations, 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 Staff Services Analyst in the Customer Support Center at (916) 227-7527, via email at firearms.bureau@doj.ca.gov, or by mail at P.O. Box 903417, Sacramento, CA 94203-4170.

Exhibit D



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

AB165

ORI (Code assigned by DOJ)

AMMUNITION RECORD REVIEW

Authorized Applicant Type

AMMUNITION ELIGIBILITY

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

CALIFORNIA DEPARTMENT OF JUSTICE - RECORD REVIEW UNIT

Agency Authorized to Receive Criminal Record Information

RECORD REVIEW UNIT

Contact Name (mandatory for all school submissions)

P.O. BOX 903417

Street Address or P.O. Box

SACRAMENTO

City

CA 94203-4170

State ZIP Code

Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name
(AKA or Alias) Last

First

Suffix

Date of Birth

Sex ☐ Male ☐ Female

Driver's License Number

Height

Weight

Eye Color

Hair Color

Billing

Number **APPLICANT TO PAY FEES**

(Agency Billing Number)

Place of Birth (State or Country)

Social Security Number

Misc.

Number

(Other Identification Number)

Home

Address Street Address or P.O. Box

City

State

ZIP Code

Your Number:

OCA Number (Agency Identifying Number)

Level of Service: ☒ DOJ

If re-submission, list original ATI number:
(Must provide proof of rejection)

Original ATI Number

Designee (Optional for individual designated by applicant pursuant to Penal Code section 11124):

Designee Name

Telephone Number (optional)

Street Address or P.O. Box

City

State

ZIP Code

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed



REQUEST FOR LIVE SCAN SERVICE (Instructions)

California Penal Code sections 11120 through 11127, and 30105 allows you to obtain a copy of your record, if any, contained in the files of the California Department of Justice and refute any erroneous or inaccurate information contained therein.

Beginning with live scan transactions submitted after April 6, 2006, the Department of Justice (DOJ) will only mail responses to you unless you complete the Designee portion on page 1 pursuant to Penal Code section 11124.

You may use the information you receive to answer questions regarding past criminal history, ammunition eligibility, or to complete an application or questionnaire. However, no person or agency may require you to obtain a copy of your record or to furnish the information for any purpose, including immigration, visa, employment, licensing, or certification. (See California Penal Code sections 11125 and 30105.)

INSTRUCTIONS FOR COMPLETING THE "REQUEST FOR LIVESCAN SERVICE"

CATEGORY	INSTRUCTIONS	COMMENTS
Authorized Applicant Type:	Verify "Ammunition Record Review" appears.	This is a mandatory field and must be completed.
Name of Applicant & Personal Descriptors:	Enter your full name, any known alias, date of birth, sex, height, weight, eye & hair color, place of birth, social security number and California driver's license number.	Name, date of birth, and sex are mandatory fields and must be provided. All others are optional.
Applicant Address:	Enter your home address.	This is a mandatory field and must be completed.
Daytime Telephone Number:	Enter the telephone number, including area code, where you can be reached between 8 a.m. and 5 p.m.	A telephone number is useful in helping to resolve problems which could result in a delay in processing your request.

AFTER COMPLETING THE "REQUEST FOR LIVE SCAN SERVICE" FORM

- Check your local telephone directory or contact your local police department or sheriff's office for a business or local law enforcement agency that offers "Live Scan" fingerprinting services, the fee charged by the business/agency for the Live Scan service, and the types of payment accepted. You can also view a current listing of Live Scan sites offering electronic fingerprinting services on the Attorney General's website at: <https://oag.ca.gov/fingerprints/locations>
- Go to the Live Scan business/agency of your choice to have your fingerprints taken and pay all applicable fees, including the fingerprint rolling fee. Please ensure that any private fingerprinting service you select is certified by the California Department of Justice.
- If you have questions about completing the "Request for Live Scan Service" form (BOF 8016RR AMMUNITION), please contact the Record Review Unit at (916) 227-7527.



REQUEST FOR LIVE SCAN SERVICE



Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information: The Division of Law Enforcement, Bureau of Firearms in the Department of Justice collects the information on this request pursuant to Penal Code sections 11122 and 11123. The Bureau of Firearms uses this information to process a person's request to obtain a copy of their criminal history record. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The Department of Justice's general privacy policy is available at <https://oag.ca.gov/privacy-policy>.

Providing Personal Information: All personal information on this request is mandatory. Failure to provide the mandatory personal information will result in your request not being processed.

Access to Your Information: You may review the records maintained by the Division of Law Enforcement, Bureau of Firearms in the Department of Justice 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 a person's request to obtain a copy of their criminal history record, we may need to share the information you provide us with any Bureau of Firearms representative or any other person designated by the Attorney General upon request. The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies when necessary to perform their legal duties, and their use of information is compatible and complies with state law, such as for investigations, 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 Staff Services Analyst in the Customer Support Center at (916) 227-7527, via email at firearms.bureau@doj.ca.gov, or by mail at P.O. Box 903417, Sacramento, CA 94203-4170.

Exhibit E



STATE OF CALIFORNIA
BCIA 8706
(Rev. 10/2018)

DEPARTMENT OF JUSTICE
PAGE 1 of 2

CLAIM OF ALLEGED INACCURACY OR INCOMPLETENESS

(Examination of Records Pursuant to Penal Code Sections 11120–11127)

To challenge the accuracy and/or completeness of your record, you **must** first complete a record review. For information on requesting a copy of your California state summary criminal history record, go to <https://oag.ca.gov/fingerprints/record-review>. Please be advised, the Bureau of Criminal Information and Analysis (BCIA) must complete its research regarding your record challenge as requested by submission of this claim form. If you wish to request an administrative hearing, please contact the Record Quality Services Program at RecordReview@doj.ca.gov.

Applicant Information (Please print or type all information requested on this form. Failure to do so may result in processing delays and/or return of the claim form.)

LAST NAME:		FIRST NAME:		MIDDLE INITIAL:
ADDRESS:	APT/UNIT:	CITY:	STATE:	ZIP CODE:
E-MAIL ADDRESS:		PHONE NUMBER:	CII NUMBER (SID):	

Reason for Dispute (Check the box that is applicable to your dispute and explain the reason for your claim in the spaces provided below. If the reason is not listed, check "Other." If you have more than two disputes, please use another page.)

Dispute One

DATE OF ARREST: _____

- | | | | |
|--|--|--|--------------------------------|
| <input type="checkbox"/> Incorrect Disposition | <input type="checkbox"/> Offense Dismissed Per 1203.4 PC | <input type="checkbox"/> Sealed Entry | <input type="checkbox"/> Other |
| <input type="checkbox"/> Missing Disposition | <input type="checkbox"/> Offense Reduced to Misdemeanor Per 17(B) PC | <input type="checkbox"/> Wrong Conviction Type | |
| <input type="checkbox"/> Not Arrested | <input type="checkbox"/> Remove Entry | <input type="checkbox"/> Wrong Personal Descriptor Information | |

Brief Explanation of Claim: _____

Dispute Two

DATE OF ARREST: _____

- | | | | |
|--|--|--|--------------------------------|
| <input type="checkbox"/> Incorrect Disposition | <input type="checkbox"/> Offense Dismissed Per 1203.4 PC | <input type="checkbox"/> Sealed Entry | <input type="checkbox"/> Other |
| <input type="checkbox"/> Missing Disposition | <input type="checkbox"/> Offense Reduced to Misdemeanor Per 17(B) PC | <input type="checkbox"/> Wrong Conviction Type | |
| <input type="checkbox"/> Not Arrested | <input type="checkbox"/> Remove Entry | <input type="checkbox"/> Wrong Personal Descriptor Information | |

Brief Explanation of Claim: _____

Declaration (The claim form must be signed and dated by the applicant. If you elect to designate a person or attorney to correspond on your behalf, please provide their full name in the space provided below.)

By signing below, I declare that I have examined a copy of my California State Summary Criminal History Record as contained in the files of the Department of Justice, Bureau of Criminal Information and Analysis, and wish to take exception to its accuracy and/or completeness. I declare under penalty of perjury that the information I have provided on this form is true and correct to the best of my ability.

Signature of Applicant

Date

I hereby administer to the following person to correspond with the Department of Justice on my behalf and authorize the person to receive a copy of the Department's findings concerning this matter: _____

Name of Designee/Attorney (if applicable)

PLEASE READ AND FOLLOW THESE IMPORTANT PROCESSING INSTRUCTIONS

- Failure to complete and sign the form correctly may result in processing delays or the return of the claim form.
- Attach copies of any official document or court orders that would verify your claim. You may attach additional sheets if necessary.
- If an attorney is submitting the claim on your behalf it must be signed and dated by you the applicant.
- Mail the completed form to the Record Quality Services Program to the address below:

Bureau of Criminal Information and Analysis
Record Quality Services Program
P.O. Box 903417
Sacramento, CA 94203-4170



CLAIM OF ALLEGED INACCURACY OR INCOMPLETENESS
(Examination of Records Pursuant to Penal Code Sections 11120–11127)

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 Penal Code Sections 11120–11127 and other various state statutes and regulations. The CJIS Division uses this information to process requests regarding disputes and exceptions taken to the accuracy and completeness of criminal records. 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 disputes and exceptions taken to the accuracy and/or completeness regarding criminal arrest records, 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 form or access to your records, you may contact the DOJ's Keeper of Records at (916) 210-3310 or by e-mail 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

CERTIFICATE OF SERVICE

Case Name: **Rhode v. Becerra** No. **3:18-cv-00802 BEN JLB**

I hereby certify that on April 10, 2020, I electronically filed the following documents with the Clerk of the Court by using the CM/ECF system:

**FOURTH SUPPLEMENTAL DECLARATION OF MAYRA G. MORALES IN
SUPPORT OF DEFENDANT XAVIER BECERRA'S OPPOSITION TO PLAINTIFFS'
MOTION FOR PRELIMINARY INJUNCTION**

I certify that **all** participants in the case are registered CM/ECF users and that service will be accomplished by the CM/ECF system.

I declare under penalty of perjury under the laws of the State of California the foregoing is true and correct and that this declaration was executed on April 10, 2020, at Sacramento, California.

Tracie L. Campbell

Declarant

/s/ *Tracie Campbell*

Signature