

SPECIAL AGREEMENT CHECKS (SAC)
U.S. Department of Agriculture

OFI FORM 86C
February 2002

U.S. OFFICE OF PERSONNEL MANAGEMENT
INVESTIGATIONS SERVICE

Agency Agreement Number	OPM USE ONLY	OPM Codes	Case Number
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AGENCY USE ONLY (COMPLETE ITEMS 1 THROUGH 14 USING INSTRUCTIONS FROM THE BACK)

1 SUBJECT'S FULL NAME	2 DATE OF BIRTH
Last Name First Name Middle Name Abbrev.	Month Day Year

3 PLACE OF BIRTH • Use the two letter code for the State. City County State Country (if not the United States)	4 SOCIAL SECURITY NUMBER
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5 OTHER NAMES USED AND DATES WHEN USED			
Name	Month/Year	Month/Year	Name
	To		To
Name	Month/Year	Month/Year	Name
	To		To

6 SEX (Mark one box) <input type="checkbox"/> Female <input type="checkbox"/> Male	7 SPECIAL AGREEMENT CODES	8 POSITION TITLE
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9 SON A G	10 SOI A G	11 OPAC-ALC NUMBER	12 ACCOUNTING DATA
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13 OTHER INFORMATION REQUIRED BY AGREEMENT

(CODE E) Credit Record - Complete if Needed. Fill in subject's address for every place lived for more than three months in the past 12 months. If additional space is needed, attach a continuation sheet to this form.

Month/Year to Month/Year #1	Street Address	Apt#	City	State	Zip
Month/Year to Month/Year #2	Street Address	Apt#	City	State	Zip

(CODE I) Immigration and Naturalization Service Record - Complete if Needed. UNITED STATES CITIZENSHIP. If subject is a U.S. Citizen, not born in the U.S., provide information about one or more of the following citizenship proofs.

Naturalization Certificate (Where was subject naturalized?)

Court	City	State	Certificate Number	Month/ Day/ Year Issued
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Citizenship Certificate (Where was the Certificate issued?)

City	State	Certificate Number	Month/ Day/ Year Issued
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State Department Form 240 - Report of Birth Abroad of a Citizen of the United States

Give the date the form was prepared and give an explanation if needed.	Month/ Day/ Year	Explanation
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U.S. Passport - This may be either a current or previously issued U.S. Passport

Passport Number	Month/ Day/ Year Issued
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Dual Citizenship - If subject is (or was) a dual citizen of the United States and another country, provide the name of that country in the space to the right. Country

Alien - If subject is an alien, provide the following information.

Place subject entered the United States	City	State	Date Entered U.S. Month/ Day/ Year	Alien Registration Number	Country(ies) or Citizenship
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(Code N) Bureau of Vital Statistics - Complete if Needed.

Mother's Full Name	Mother's Maiden Name	Father's Full Name
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14 Requesting Official Name and Title	Signature	Telephone Number (including area code)	Date
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INSTRUCTIONS FOR COMPLETING OFI FORM 86C

Please follow instructions for specific items below. When you have completed the required fields on the OFI Form 86C, please return form to:

USDA, ARS Homeland Security
5601 Sunnyside Avenue, Room 2-1112A, Mail Stop 5146
Beltsville, MD 20705

INSTRUCTIONS FOR SPECIFIC ITEMS

ITEM	INSTRUCTION																																																																																																																								
1	Your <u>full</u> name must be given. If you are a "Jr.", "Sr.", "III", etc., enter the abbreviation in the box after the middle name. If you have initials only, enter each initial in the appropriate box. If you have no middle name, enter "NMN."																																																																																																																								
2	Provide the month, day, and year of your birth. Example: Enter June 7, 1942 as: 06/07/42.																																																																																																																								
3	<p>Place of birth: Enter full name of city/town under CITY. Under COUNTY, give county if born in U.S. Using the Coding shown below, provide abbreviation for State if born in the U.S. or its territories. Provide country of birth under COUNTRY only if not born in the United States.</p> <p style="text-align: center;">CODING FOR STATES, DISTRICT OF COLUMBIA, AND U.S. TERRITORIES (ITEM 3)</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td>Alabama</td><td>AL</td><td>Hawaii</td><td>HI</td><td>Massachusetts</td><td>MA</td><td>New Mexico</td><td>NM</td><td>South Dakota</td><td>SD</td> </tr> <tr> <td>Alaska</td><td>AK</td><td>Idaho</td><td>ID</td><td>Michigan</td><td>MI</td><td>New York</td><td>NY</td><td>Tennessee</td><td>TN</td> </tr> <tr> <td>Arizona</td><td>AZ</td><td>Illinois</td><td>IL</td><td>Minnesota</td><td>MN</td><td>North Carolina</td><td>NC</td><td>Texas</td><td>TX</td> </tr> <tr> <td>Arkansas</td><td>AR</td><td>Indiana</td><td>IN</td><td>Mississippi</td><td>MS</td><td>North Dakota</td><td>ND</td><td>Utah</td><td>UT</td> </tr> <tr> <td>California</td><td>CA</td><td>Iowa</td><td>IA</td><td>Missouri</td><td>MO</td><td>Ohio</td><td>OH</td><td>Vermont</td><td>VT</td> </tr> <tr> <td>Colorado</td><td>CO</td><td>Kansas</td><td>KS</td><td>Montana</td><td>MT</td><td>Oklahoma</td><td>OK</td><td>Virginia</td><td>VA</td> </tr> <tr> <td>Connecticut</td><td>CT</td><td>Kentucky</td><td>KY</td><td>Nebraska</td><td>NE</td><td>Oregon</td><td>OR</td><td>Washington</td><td>WA</td> </tr> <tr> <td>Delaware</td><td>DE</td><td>Louisiana</td><td>LA</td><td>Nevada</td><td>NV</td><td>Pennsylvania</td><td>PA</td><td>West Virginia</td><td>WV</td> </tr> <tr> <td>Florida</td><td>FL</td><td>Maine</td><td>ME</td><td>New Hampshire</td><td>NH</td><td>Rhode Island</td><td>RI</td><td>Wisconsin</td><td>WI</td> </tr> <tr> <td>Georgia</td><td>GA</td><td>Maryland</td><td>MD</td><td>New Jersey</td><td>NJ</td><td>South Carolina</td><td>SC</td><td>Wyoming</td><td>WY</td> </tr> <tr> <td>American Samoa</td><td>AS</td><td>District of Columbia</td><td>DC</td><td>Guam</td><td>GU</td><td>Northern Mariana Island</td><td>CM</td><td>Puerto Rico</td><td></td> </tr> <tr> <td>PR</td><td>Trust Territory</td><td>TT</td><td>Virgin Islands</td><td>VI</td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	Alabama	AL	Hawaii	HI	Massachusetts	MA	New Mexico	NM	South Dakota	SD	Alaska	AK	Idaho	ID	Michigan	MI	New York	NY	Tennessee	TN	Arizona	AZ	Illinois	IL	Minnesota	MN	North Carolina	NC	Texas	TX	Arkansas	AR	Indiana	IN	Mississippi	MS	North Dakota	ND	Utah	UT	California	CA	Iowa	IA	Missouri	MO	Ohio	OH	Vermont	VT	Colorado	CO	Kansas	KS	Montana	MT	Oklahoma	OK	Virginia	VA	Connecticut	CT	Kentucky	KY	Nebraska	NE	Oregon	OR	Washington	WA	Delaware	DE	Louisiana	LA	Nevada	NV	Pennsylvania	PA	West Virginia	WV	Florida	FL	Maine	ME	New Hampshire	NH	Rhode Island	RI	Wisconsin	WI	Georgia	GA	Maryland	MD	New Jersey	NJ	South Carolina	SC	Wyoming	WY	American Samoa	AS	District of Columbia	DC	Guam	GU	Northern Mariana Island	CM	Puerto Rico		PR	Trust Territory	TT	Virgin Islands	VI					
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4	Provide your Social Security Number.																																																																																																																								
5	To the extent information is available, list all other names you were known by or are now using. If you are a female, and you are/were married, include maiden name, and other married names if married more than once. Provide beginning and ending dates for use of each name. Identify maiden name with "NEE."																																																																																																																								
6	Check the appropriate box to specify sex as MALE or FEMALE.																																																																																																																								
7	Leave blank.																																																																																																																								
8	Provide your position title, if known.																																																																																																																								
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