

Cogent Systems
Proof of Fingerprint Submission

Pennsylvania Department of Education
Applicant Processing Service

Registration Information**Registration Date:** 01/27/2016**Registration ID:** PAE161R738293510**Last Name:** FESTA**First Name:** JOSEPH**Transaction Type:** WALSH ACT - SCHOOLS SAFE**Registration Fee:** \$27**Payment Type:** Credit Card

Transaction Information (Proof of Printing) Transaction Status: Submitted**Fingerprint Date:** 02/11/2016**Fingerprint Site:** UPS Store 5145**TCN:**PDE3P27960**PSP TCN:** 2381551668**Results Received Date:** 02/11/2016**Receipt Print Date:** 02/26/2016[Print Receipt](#)[Send Email](#)[Home](#)

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