



DAVID S. BROWN
SHERIFF

OFFICE OF THE SKAMANIA COUNTY
SHERIFF

PO Box 790
200 Vancouver Ave.
Stevenson, WA 98648
Phone (509) 427-9490
Fax (509) 427-4369
www.skamaniasheriff.com
scso@co.skamania.wa.us

Dave Cox
Undersheriff

Pat Bond
Chief Criminal Deputy

Marlea McKenzie
Chief Civil Deputy

David Waymire
Jail Superintendent

REQUEST FOR PUBLIC RECORDS

REQUESTED BY		
Name:		Date:
Address:		
City, State, ZIP:		Phone No:
REQUESTED INFORMATION		
INCIDENT INFORMATION		
Date of Incident:	Location of Incident:	Nature of Incident:
Parties involved		Investigation Officer:
		Case Number:
REQUESTER READ AND SIGN: I understand that secondary dissemination of any information obtained is prohibited unless in compliance with RCW 10.97.050 and RCW 42.17.310. I also understand that requested records may be redacted in accordance with RCW 42.17. I understand that I will be charged an additional \$.15 cents per page copy fee for 10 or more pages (see posted fee schedule for further information on required fees). I understand that records will be mailed and/or made available once payment in full is received by SCSO. The only acceptable form of payment is by cash or check	COMPLETED BY CIVIL OFFICE	
	NO. OF COPIES _____ @ \$.15	\$
	REPORT FEE \$15.00 EA	\$
	AUDIO CD \$20.00 EA	\$
	VIDEO CD \$20.00 EA	\$
	PHOTOGRAPH CD \$10.00 EA	\$
	SUBTOTAL	\$
POSTAGE	\$	
TOTAL DUE:	\$	
REQUESTER'S SIGNATURE:		
ACKNOWLEDGEMENT OF RECORDS RELEASED		
DATE OF RELEASE:	DATE OF BILLING:	AMOUNT RECEIVED:
RECIPIENT'S SIGNATURE		PUBLIC RECORDS OFFICER SIGNATURE

PLEASE ALLOW FIVE BUSINESS DAYS FOR RESPONSE TO REQUEST PER RCW 47.17.32