

# WASHINGTON ASSOCIATION OF SHERIFFS & POLICE CHIEFS

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*Serving the Law Enforcement Community and the Citizens of Washington*



## Sex Offense Case File Request Form

Please type or print legibly:

Criminal Justice Agency Requesting File:		
Name of Person Requesting File:		
Address:		
City:	State:	Zip Code:
E-Mail Address:		
Phone Number:	Fax Number:	

Case File Originating Agency:	
Incident Number:	Offense(s):
Offender Name:	

**RCW 40.14.070(2)(c):** "Any record transferred to the Washington association of sheriffs and police chiefs pursuant to (b) of this subsection shall be deemed to no longer constitute a public record pursuant to RCW 42.56.010 and shall be exempt from public disclosure. Such records shall be disseminated only to criminal justice agencies as defined in RCW 10.97.030 for the purpose of determining if a sex offender met the criteria of a sexually violent predator as defined in chapter 71.09 RCW and the end-of-sentence review committee as defined by RCW 72.09.345 for the purpose of fulfilling its duties under RCW 71.09.025 and 9.95.420."

I certify, under penalty of perjury, that my agency is a criminal justice agency as defined in RCW 10.97.030 and this request is only for the purpose indicated below:

- Determining if a sex offender meets the criteria of a sexually violent predator.
- End-of-sentence review committee determining if a sex offender meets the criteria of a sexually violent predator.
- Case file originating Law Enforcement Agency requesting return of its own file for the following reason:

Please specify: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

For WASPC Use Only	
Date Received	
Date Sent	
Initials	