

Snohomish County Sheriff's Office
Public Records Request Form

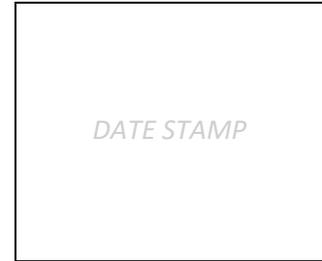
Susanna Johnson, Sheriff

Your Name: _____

Your E-Mail Address: _____

Your Mailing Address: _____

Your Phone Number: _____



What are you requesting from the Snohomish County Sheriff's Office? (Check all that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> Case Report | <input type="checkbox"/> Digital Media (<i>photos, video files, audio files</i>) | <input type="checkbox"/> Use of Force Report/Use of Force Data |
| <input type="checkbox"/> Incident Report | <input type="checkbox"/> Employee Personnel Files (<i>training, certificates, letters of commendation, evaluations</i>) | <input type="checkbox"/> Employee Communication (<i>Outlook items, text messages, Teams meetings</i>) |
| <input type="checkbox"/> Collision Report | <input type="checkbox"/> Employee Disciplinary Files (<i>personnel complaints, internal investigations, citizen inquiries</i>) | <input type="checkbox"/> Other/I need assistance with what to request |
| <input type="checkbox"/> Ticket/Infraction | | |

Please provide as much detail as you can. (Fill in each blank you have information for)

Date Range:
Full Incident Address:
Involved Name(s)/Date(s) of Birth:
Employee Name(s):
Vehicle Information:
Police Incident/Case Number:
Incident Type:
Other Pertinent Information: