

SCSO/SPD DIGITAL PHOTOGRAPH REQUEST

Today's Date: _____

Report # _____

Forensic Photo Release Policy:

Notice: You are responsible for the care, use, and custody of the photos released to you. You assume all liability for any improper use of these photos. The Spokane County Sheriff's Office does not assume any liability for the photos once they have been released into your custody.

RCW 68.50.105 Autopsy, Post Mortems-Reports and Records Confidential Exceptions. Reports and records of autopsies or post mortems shall be confidential, except that the following persons may examine and obtain copies of any such report or record: The personal representative of the decedent as defined in RCW 11.02.005, any family member, the attending physician, the prosecuting attorney or law enforcement agencies having jurisdiction, public health officials, or to the department of labor and industries in cases in which it has an interest under RCW 68.50.103.

RCW 42.56.050 Invasion of Privacy, when. A person's "right to privacy," "right of privacy," "privacy," or "personal privacy," as these terms are used in this chapter, is invaded or violated only if disclosure of information about the person: (1) Would be highly offensive to a reasonable person, and (2) is not of legitimate concern to the public. The provisions of this chapter dealing with the right to privacy in certain public records do not create any right of privacy beyond those rights that are specified in this chapter as express exemptions from the public's right to inspect, examine, or copy public records.

Pre-Adjudicated. case scene photos maybe released upon request, after the prosecuting attorney's office has determined whether the nondisclosure is essential to effective law enforcement or for the protection of any person's right to privacy as provided for in RCW 42.56.240(1): Depending on jurisdiction, the county or city prosecuting attorney's office will make the above determination for public disclosure. **Adjudicated, and Concluded Investigation :** Photographs of injured persons, deceased persons or deceased person's remains will generally not be released as provided in RCW 42.56.240(1) and RCW 42.56.050.

Signature: _____ Date: _____

REQUEST INFORMATION

Date of Incident: _____ Type of Incident: _____

Location of Incident: _____

Requestor's Name: _____ Daytime Phone: _____

Requestor's Address: _____ City: _____ State: _____ Zip: _____

Purpose of Request/Relation to Incident: _____

Client's Name and/or Claim #: _____

Request Received By: _____ Date: _____

Request Authorized Release by: _____ Date: _____

AUTHORIZATION AND PRE-PAYMENT IS REQUIRED FOR PHOTOGRAPHIC ORDERS

Mail or Fax Request to:
City Records
1100 W. Mallon Ave
Spokane, WA 99260
Fax: 509-625-4059

For Questions please contact:
County-City Forensic Unit
1100 W. Mallon
Spokane, WA 99260
Phone: 477-2334 Ext. 2