Daviess County

Sheriff's Office

Jerry Harbstreit
Sheriff

Gary Allison
Chief Deputy

I authorize my criminal arrests to be released to:

_____

_____

_____

Printed Name: _____
First Middle Last (Maiden / Alias)

Date of Birth: _____

Social Security #: _____

Signature of Release: _____ Date: _____

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☐ **No Local Criminal Record Found** ☐ **Record Found Below**

_____

_____

_____

_____

_____

_____

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_____

Completed By: _____ **Date:** _____

101 N. E. 4th Street, Washington, IN 47501 -- Phone: 812-254-1060 -- Fax: 812-254-5972