



San Juan County Sheriff's Office
Juvenile Pick-Up Notice

Case No. _____
Date _____
Time _____

Juveniles Name: _____
Last First **Middle(Mandatory for entry)

Nickname _____ DOB _____ Age _____

Address: _____

Cell# _____ Vehicle? _____ Description _____ License# _____

Race _____ Sex _____ Hgt _____ Wght _____ Eyes _____ Hair Color _____ Style _____

Scars/Marks/Tattoos _____

Shirt _____ Pants _____ Jacket _____ Shoes _____

Hat _____ Glasses/Contacts _____ Other Articles _____

Money in possession _____ School Attended _____ Grade _____

Possible Companions: _____

Possible Destinations: _____

Reason For Leaving _____ 1st time _____

Date Last Seen: _____ Time _____ am/pm By Whom _____

Where Last Seen _____

Additional Remarks _____

Previous Juvenile Record _____ On Probation _____

Is APB for Washington State, or PARTICULAR DESTINATION, requested? _____

I declare the above Juvenile to be a runaway from Juvenile's Legal Custodian and hereby authorize to place in detention. I agree to notify the Sheriff's Office if child returns or is located:

Signed _____
Parent or Legal Guardian Deputy

Sheriff's Use Only: Advised: WSP _____ DSHS _____ JUV.CT _____ ACCESS _____

Parents/Guardians Information:

Mothers Name _____
Last First Middle

Fathers Name _____
Last First Middle

Juvenile Resides with _____

Address _____

Mothers Information:

Address: _____

Home # _____ Work# _____

Cell# _____ Email _____

Fathers Information:

Address: _____

Home # _____ Work# _____

Cell# _____ Email _____

Any other pertinent information: _____

Signed:

Mother or Legal Guardian

Father or Legal Guardian