

CASCADE COUNTY ATTORNEY'S OFFICE

State of Montana

Telephone: (406) 454-6915 Criminal Department
(406) 454-6904 Civil Department
FAX: (406) 454-6949



Joshua A. Racki
County Attorney

121 Fourth Street North – Suite 2A
Great Falls, Montana 59401

PROPERTY RELEASE FORM

Agency:

- o Great Falls Police Department (GFPD) – Evidence Unit (406) 455-8541
- o Cascade County Sheriff's Office (CCSO) – Evidence Unit (406) 454-7698

Agency Report/Case Number: _____

Investigator: _____

Court Case Number: _____

Defendant/Victim: _____

Property Owner Information:

Name: _____

Phone: _____

Mailing Address: _____

Property Requested: _____

By signing below, I attest under penalty of perjury that I am the legal owner of the property requested above, with all rights and privileges pertaining thereto. Upon approval I shall contact the Agency Evidence Unit to arrange obtaining my property.

Dated: _____

PROPERTY OWNER SIGNATURE

[NOTARY SEAL]

NOTARY PUBLIC STATE OF MONTANA

Release to 3rd Party: By signing below, I authorize the GFPD/CCSO to release the property requested above to:

I understand that once the property is released, Cascade County/GFPD/CCSO is not responsible for such property. I waive all claims which I may have against Cascade County/GFPD/CCSOP for lost and/or damaged property or other occurrence arising from the release of the property to the person designated above.

PROPERTY OWNER SIGNATURE

FOR OFFICE USE ONLY BEYOND THIS POINT

Action to be taken:

- Return property
- Return property ONLY after photographing or video recording the property
- Sell, destroy, or otherwise dispose of property according to the agency's regulations and policies.
- Other: _____

Property to be released:

- All items listed above
- Only these items listed here: _____

Release:

- Approved
- Denied _____

By: _____

Job Title: _____

Date: _____