



ESCALON POLICE DEPARTMENT

Evidence & Property Section
Office Hours: Monday through Friday
10:00 AM to 2:00 PM

2060 McHenry Ave, Escalon, CA 95320
Voice: (209) 691-7362
Escalon PD Fax: (209) 838-6561

REQUEST FOR AUTHORIZATION TO RELEASE EVIDENCE

1. INSTRUCTIONS

This form must be completed and submitted to the San Joaquin County District Attorney's Office before evidence held by the Escalon Police Department can be released. This form must be legible and complete to avoid delay. Please be aware the evidence release process can take several days.

Complete Sections 2, 3, and 4, and then mail, deliver, or fax this form to the San Joaquin County District Attorney's Office. Once reviewed, *the District Attorney's Office will return the form to the Escalon Police Department.* Once the form is received by the Escalon Police Department, you will be contacted.

Be advised you may be required to obtain a Court Order for the release of evidence. If so, you must contact the Court or an attorney.

The San Joaquin County District Attorney's Office is located at:

For Adult Defendants: 222 E. Weber Avenue, Room 202, Stockton, CA 95202 - Voice: (209) 468-2400 / DA's Fax: (209) 465-0371
Mailing Address for Above: PO Box 990, Stockton, CA 95201-0990

For Asset Forfeitures: Same as above – Attention Asset Forfeiture Unit. Voice: (209) 468-2493 / DA's Fax: (209) 465-0371

For Juvenile Matters: 535 W. Matthews Road, French Camp, CA 95231 - Voice: (209) 468-4260 / DA's Fax: (209) 983-8619

2. GENERAL CASE INFORMATION

Escalon PD Case #: _____ District Attorney Case #: _____ Date of Incident: _____ Crime: _____

Defendant's or Minor's Name: _____ Date of Birth: _____

3. PERSON MAKING REQUEST

Name: _____ Date of Birth: _____ Home Phone #: _____

Address: _____
Street Number & Street Name City State Zip Code

Date of Request: _____ E-Mail Address: _____

4. FULLY DESCRIBE THE ITEMS YOU ARE REQUESTING (ATTACH A SECOND SHEET IF NECESSARY)

USE ONE LINE PER ITEM. INCOMPLETE DESCRIPTIONS WILL VOID THIS REQUEST

1. _____

2. _____

3. _____

LIST THE REASON(S) THIS EVIDENCE SHOULD BE RELEASED TO YOU

1. _____

(Below Section for District Attorney Use Only)

☐ The item(s) listed in Section #4 are no longer needed for prosecution and may be released at the discretion of the Escalon Police Department.
Special Instructions: _____

☐ The listed items are still needed for prosecution purposes. Do not release at this time.

☐ This office has not filed a criminal complaint and does not intend to do so. The ultimate decision to release the evidence is solely up to the Escalon Police Department.

☐ A Court Order is required before this evidence can be released.

Signed: _____ Printed Name: _____ Date: _____
Deputy District Attorney Deputy District Attorney

Please do not return this form to the requesting party. Fax (209-838-6561) or mail to the Escalon PD Property/Evidence Unit.