

MINNEHAHA COUNTY SHERIFF'S OFFICE Booking Photo Release Form



Arrested Person's Name:					
Date of Arrest (if Known):					
Arrest Charge(s) (if Known):					
Date of Request:					
Date of Request.					
Person/Business Requesting Photo:					
Address:			Phone #:		
Requesting Printed or Emailed Photo:					
If Email Request, Provide Email Address:					
DI . D. I				((II 0 1)	
	1	uirements (Offi	ice Sta	aff Use Only)	
Photo Taken Within The Last 6 Months Date taken:					
Minnehaha County Inmate → If no, what County:			nty:		
Arrest for Felony Crime ————		List Felony Cha	rge(s)		
Non - Federal Inmate					
Non- Transport Company Inmate					
MCSO Staff Authorizing Release:			Badge #:		
Date Photo Release:	Printed Photo or Email:				
Payment Method — ► Cash		Credit Card		Receipt #:	