



JAMES R. WILSON
WILLIAMSON COUNTY SHERIFF

L.C. "TONY" MARSHALL
Chief Deputy

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ROBERT CHAPMAN
Asst Chief Deputy- Law Enforcement

RICHARD ELLIOTT
Asst Chief Deputy - Corrections

RELEASE OF CHILD / CHILDREN

Case Number

For the Parent or Guardian of Child(ren):

I, _____, request the Williamson County Sheriff's
Name of Person Releasing Child
Office to release my child(ren):

- 1) _____
Name of Child / Date of Birth
- 2) _____
Name of Child / Date of Birth
- 3) _____
Name of Child / Date of Birth
- 4) _____
Name of Child / Date of Birth

to _____ on _____ at _____
Name of Person Receiving Child(ren) Date Time

Signature of Parent or Guardian Releasing Child(ren) Date

For the Person(s) receiving Custody of the Child(ren):

I, _____, _____,
Name of Person Receiving Child(ren) Relationship to Child(ren)
of the child(ren) listed above, take custody of him/ her/ them on _____
Date

Signature of Person Receiving Child(ren)

Checked Criminal History (CCH)	Yes__ No __
Notified CPS	Yes__ No __
Attached Copy of DL	Yes__ No __