

**SKAGIT COUNTY, WASHINGTON**

**REQUEST FOR: NON-IDENTIFYING ADOPTION INFORMATION**

*Date Stamp*

**\*\*PLEASE PRINT \*\***

**Name of Requestor** \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Requestor's Relationship to Adoptee** \_\_\_\_\_ **Ph # ( \_\_\_\_\_ )** \_\_\_\_\_  
(i.e., self, birth parent, adoptive parent)

**RCW 26.33.340 Department, agency, and court files confidential - Limited disclosure of information.**

Department, agency, and court files regarding an adoption shall be confidential except that reasonably available nonidentifying information may be disclosed upon the written request for the information from the adoptive parent, the adoptee, or the birth parent. Identifying information may also be disclosed through the procedure described in RCW 26.33.343.

*There is a \$30.00 statutory (RCW 36.18.016(11)) special services fee. Following judicial review your request will be processed. Non-identifying information that is available may be disclosed. If no record is found, you will be notified. Please mail completed request form and fee to:*

**Skagit County Clerk  
205 W. Kincaid, Room 103  
Mount Vernon, WA 98273**

**TO ASSIST THE CLERK IN LOCATING THE ADOPTION RECORD, PLEASE PROVIDE AS MUCH OF THE FOLLOWING INFORMATION AS POSSIBLE:**

*\*PLEASE INDICATE IF UNKNOWN.*

Was the adoption filed in Skagit County? \_\_\_\_\_

Superior Court Case No. \_\_\_\_\_ Date of Adoption \_\_\_\_\_

Name of Adoptee Before Adoption \_\_\_\_\_

Name of Adoptee After Adoption (if different than above) \_\_\_\_\_

Adoptee (circle one) MALE or FEMALE Adoptee's Birthdate \_\_\_\_\_ Age When Adopted \_\_\_\_\_

Birth Mother's Name (at time of birth) \_\_\_\_\_

Birth Father's Name \_\_\_\_\_

Adoptive Mother's Name \_\_\_\_\_

Adoptive Father's Name \_\_\_\_\_

**REQUESTOR'S Signature** \_\_\_\_\_

*Signed and sworn before me on (date)* \_\_\_\_\_

*Notary Seal*

Notary Public in and for the State of \_\_\_\_\_

**OFFICE USE ONLY**

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RECORD SEARCH BY \_\_\_\_\_ RE-CHECK SEARCH BY (Supervisor) \_\_\_\_\_

RESPONSE \_\_\_\_\_

DATE \_\_\_\_\_