



**STATE OF WASHINGTON**  
**DEPARTMENT OF SOCIAL AND HEALTH SERVICES**

**Children's Administration**  
CA/N History Checks Unit

**MS: N17-27 • 500 1<sup>st</sup> Ave So. 5<sup>th</sup> Floor**  
1-800-562-5624; Fax: (206) 341-7930

October 31, 2013

From: State of Washington  
Department of Social and Health Services  
Children's Administration  
500 First Avenue South, Suite 501  
Seattle, Washington 98104-9968  
FAX (206) 341-7930  
E-mail [CANhistorychecks@dshs.wa.gov](mailto:CANhistorychecks@dshs.wa.gov)

RE: Updated findings request form and instructions  
\$20.00 fee per inquiry

This is to inform you that effective **November 11, 2013**, State of Washington DSHS Children's Administration will require a fee of \$20 for each inquiry of an individual's child and abuse/neglect findings request.

All requests dated after **November 11, 2013**, must use the attached form along with a check for \$20.00 per individual being checked. These requests are for the purposes of licensing or adoption. Incorrect forms will be returned and requests without payment will not be processed.

**NEW instructions: FORM must be typewritten and signed. Any handwritten or incomplete forms will be returned for correction.**

1. Complete one form for each individual for whom a child abuse/neglect findings request is being requested.
2. Include a check in the amount of \$20.00, per individual inquiry, made payable to DSHS Children's ADMN
3. Mail completed requests to:  
**DSHS Children's Administration ATTN: Fiscal**  
**PO Box 45710**  
**Olympia, WA 98504-5710**

If you have any questions, please contact Janelle DeCoteau [janelle.decoteau@dshs.wa.gov](mailto:janelle.decoteau@dshs.wa.gov) (206) 341-7379 or Chris Parvin [chris.parvin@dshs.wa.gov](mailto:chris.parvin@dshs.wa.gov) (360) 902-0770.