REQUEST FOR PUBLICATION OF PHOTOGRAPH - MINOR CHILD

YOUTH INVESTIGATIONS DIVISION/CHICAGO POLICE DEPARTMENT

RD NO	
I/We, the Parent(s)/Legal Guardian(s) of	a minor
., -	
of the age of, born,20 in	
, formerly residing at _	,
Chicago, Illinois, and whose current whereabouts are ur	nknown to me/us, do hereby request that
our/my photograph(s) and/or electronic media image(s)	of said minor child be given to and utilized
by the Chicago Police Department's Youth Investigation	s Division.
I/We understand that the Chicago Police Department's Y	Youth Investigations Division may dissemi-
nate this photo(s) and/or electronic media image(s) to provide the provided image (s) and (s)	rivate agencies, public agencies, and/or
social media platforms including, but not limited to the C	chicago Police Department's web site for
the sole purpose of aiding the Chicago Police Departme	ent in locating my/our child.
Further, I/We understand that the Chicago Police Depar	tment and those chosen agencies will
retain custody of said photograph(s) and/or electronic m	nedia image(s) and that the agencies or
social media platforms, upon advice of the Chicago Poli	ce Department, will have the sole
discretion as to the photo's and/or electronic media imag	ge(s) publication and dissemination. I/we
understand that if my/our child is located that publication	n of said photo(s) and/or social media
image(s) will cease as soon as is practicable.	
I/We have had an opportunity to read this document and	d a member of the Chicago Police
Department has explained its terms to me/us. I/We are	signing the Request for Publication of
my/our child's photo(s) and/or electronic media image(s)) as my/our free and voluntary act.
SignedPARENT(S)/LEGAL GUARDIAN(S)	Dated
Signed PARENT(S)/LEGAL GUARDIAN(S)	Dated
Witness	Dated