

# Disposition Reporting

RCW 10.98.040(5)

## Requirements of RCW 10.98.050

- It is the duty of the judge or juvenile court to ensure felony defendants have been fingerprinted and the arrest cards submitted to the Identification and Criminal History Section.

## Requirements of RCW 10.98.090

- Disposition information must be promptly reported by the appropriate court, prosecutor, or law enforcement agency to the Washington State Patrol.

TYPE OR PRINT ALL INFORMATION IN BLACK  
LAST NAME FIRST NAME MIDDLE NAME

Page \_\_\_\_\_

of \_\_\_\_\_

ALIASES CONTRIBUTOR OF FINGERPRINTS (ORI)

**WASHINGTON STATE  
DISPOSITION REPORT**

State Identification and Criminal History Section  
P.O. Box 42633  
Olympia, WA 98504-2633

DATE OF BIRTH DOB  
Month Day Year

DATE ARRESTED OR RECEIVED DOA SEX RACE HGT. WGT. EYES HAIR PLACE OF BIRTH POB

ARREST NO. OCA  
FBI NO. FBI  
SID NO. SID  
SOCIAL SECURITY NO. SOC  
FORM SUBMITTED BY:  
SIGNATURE:  
TITLE:  
DATE

COURT CAUSE NUMBER \_\_\_\_\_  
 COURT ORDERED EXPUNGEMENT ATTACHED  
 INTERIM REPORT  
 SUPPLEMENTAL REPORT

DISPOSITION AND SENTENCING INFORMATION:

COUNT(S) UNIQUE NO. (OIN) DISPOSITION DATE  
 NO CHARGE FILED  
 DISMISSED  
 NOT GUILTY  
 GUILTY—NO PENALTY  
 GUILTY (FELONY REFER J&S REPORT)

CHARGED OFFENSE CODE NO.

INCLUDED / CONCURRENT / CONSECUTIVE WITH COUNT(S) FINE FINE SUSPENDED COSTS

DOC COMMITMENT TERM  
 SUSPENDED  DEFERRED

JAIL TERM JAIL SUSPENDED DEFERRED CREDIT TIME SERVED TERM COM. SUPER. / PROB. HRS. COM. SERVICE  
 CONDITIONS

APPEAL DATE DISPOSITION

OTHER (FTA—WARRANT ISSUED, COMMUNITY SUPERVISION / PROBATION EXTENSION, COURT MANDATE, ETC.)

COURT CAUSE NUMBER \_\_\_\_\_

COUNT(S) UNIQUE NO. (OIN) DISPOSITION DATE  
 NO CHARGE FILED  
 DISMISSED  
 NOT GUILTY  
 GUILTY—NO PENALTY  
 GUILTY (FELONY REFER J&S REPORT)

CHARGED OFFENSE CODE NO.

INCLUDED / CONCURRENT / CONSECUTIVE WITH COUNT(S) FINE FINE SUSPENDED COSTS

DOC COMMITMENT TERM  
 SUSPENDED  DEFERRED

JAIL TERM JAIL SUSPENDED DEFERRED CREDIT TIME SERVED TERM COM. SUPER. / PROB. HRS. COM. SERVICE  
 CONDITIONS

APPEAL DATE DISPOSITION

OTHER (FTA—WARRANT ISSUED, COMMUNITY SUPERVISION / PROBATION EXTENSION, COURT MANDATE, ETC.)

PLEASE SHOW EXACT AMOUNTS OF FINE, JAIL, COMMUNITY SUPERVISION, PROBATION, AND SUSPENSIONS TO CONTINUE, ATTACH ADDITIONAL DISPOSITION REPORT(S).

RIGHT FOUR FINGERS SIMULTANEOUSLY

# The Disposition Form

The contributing law enforcement agency forwards the disposition report or the PCN to the prosecutor or appropriate court.



TYPE OR PRINT ALL INFORMATION IN BLACK  
 LAST NAME FIRST NAME MIDDLE NAME

**Example, Margaret Queen**

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007840519 of \_\_\_\_\_

WASHINGTON STATE  
**DISPOSITION REPORT**  
 State Identification and Criminal History Section  
 P.O. Box 42633  
 Olympia, WA 98504-2633

ALIASES CONTRIBUTOR OF FINGERPRINTS (ORI)  
**Sample-Queen, M WA0340000**  
**Looney, Queen Thurston County S.O.**

DATE OF BIRTH DOB  
 Month Day Year  
**05/05/1960**

THIS DATA MAY BE COMPUTERIZED IN LOCAL, STATE AND NATIONAL FILES  
 DATE SIGNATURE OF OFFICIAL TAKING FINGERPRINTS

DATE ARRESTED OR RECEIVED DOA  
**01/12/2007**

ARREST NO. OCA  
**587962**

SEX RACE HGT. WGT. EYES HAIR PLACE OF BIRTH POB  
**F W 505 125 Blu BRO WA**

FORM SUBMITTED BY:  
 FBI NO. FBI  
**9007700**  
 SIGNATURE:  
 SID NO. SID  
**WA10000825**  
 SOCIAL SECURITY NO. SOC  
**510-00-0000**  
 TITLE:  
 DATE

OFFENSES CHARGED AT ARREST

**0230200 Burglary -1**

COURT CAUSE NUMBER \_\_\_\_\_  
 COURT ORDERED EXPUNGEMENT ATTACHED  
 INTERIM REPORT  
 SUPPLEMENTAL REPORT

DISPOSITION AND SENTENCING INFORMATION:

COUNT(S) UNIQUE NO. (OIN) DISPOSITION DATE  
 NO CHARGE FILED  
 DISMISSED  
 NOT GUILTY  
 GUILTY—NO PENALTY  
 GUILTY (FELONY REFER J&S REPORT)

CHARGED OFFENSE CODE NO.

INCLUDED / CONCURRENT / CONSECUTIVE WITH COUNT(S) FINE FINE SUSPENDED COSTS

DOC COMMITMENT TERM  
 SUSPENDED  DEFERRED

JAIL TERM JAIL SUSPENDED DEFERRED CREDIT TIME SERVED TERM COM. SUPER. / PROB. HRS. COM. SERVICE  
 CONDITIONS

DATE DISPOSITION  
 APPEAL

OTHER (FTA—WARRANT ISSUED, COMMUNITY SUPERVISION / PROBATION EXTENSION, COURT MANDATE, ETC.)

COURT CAUSE NUMBER \_\_\_\_\_

COUNT(S) UNIQUE NO. (OIN) DISPOSITION DATE  
 NO CHARGE FILED  
 DISMISSED  
 NOT GUILTY  
 GUILTY—NO PENALTY  
 GUILTY (FELONY REFER J&S REPORT)

CHARGED OFFENSE CODE NO.

INCLUDED / CONCURRENT / CONSECUTIVE WITH COUNT(S) FINE FINE SUSPENDED COSTS

DOC COMMITMENT TERM  
 SUSPENDED  DEFERRED

JAIL TERM JAIL SUSPENDED DEFERRED CREDIT TIME SERVED TERM COM. SUPER. / PROB. HRS. COM. SERVICE  
 CONDITIONS

DATE DISPOSITION  
 APPEAL

OTHER (FTA—WARRANT ISSUED, COMMUNITY SUPERVISION / PROBATION EXTENSION, COURT MANDATE, ETC.)

PLEASE SHOW EXACT AMOUNTS OF FINE, JAIL, COMMUNITY SUPERVISION, PROBATION, AND SUSPENSIONS TO CONTINUE, ATTACH ADDITIONAL DISPOSITION REPORT(S).


RIGHT FOUR FINGERS SIMULTANEOUSLY



SIGNATURE OF PERSON FINGERPRINTED

The disposition report is completed with the information from that arrest event and the subjects right four fingerprints



WASHINGTON STATE <b>DISPOSITION REPORT</b> State Identification and Criminal History Section P.O. Box 42633 Olympia, WA 98504-2633		TYPE OR PRINT ALL INFORMATION IN BLACK LAST NAME FIRST NAME MIDDLE NAME <b>Example, Mary Q</b>		Page _____ of _____
ALIASES <b>Doe, Janet M</b>		CONTRIBUTOR OF FINGERPRINTS (ORI) <b>WA0340100</b>		DATE OF BIRTH DOB Month Day Year <b>05/05/1960</b>
THIS DATA MAY BE COMPUTERIZED IN LOCAL, STATE AND NATIONAL FILES DATE SIGNATURE OF OFFICIAL TAKING FINGERPRINTS		DATE ARRESTED OR RECEIVED DOA <b>01/01/2001</b>		SEX RACE HGT. WGT. EYES HAIR PLACE OF BIRTH POB <b>F W 500 150 BRO BLK WA</b>
OFFENSES CHARGED AT ARREST <b>ASSAULT 2</b>		ARREST NO. OCA <b>B12304</b>		FORM SUBMITTED BY: SIGNATURE: <b>SUBMITTING AGENCY</b> TITLE: <b>NAME AND DATE</b> DATE
COURT CAUSE NUMBER <b>08 1234567</b>		<input type="checkbox"/> INTERIM REPORT <input type="checkbox"/> COURT ORDERED EXPUNGEMENT ATTACHED <input type="checkbox"/> SUPPLEMENTAL REPORT		
DISPOSITION AND SENTENCING INFORMATION:				
COUNT(S)	UNIQUE NO. (OIN)	DISPOSITION DATE <b>01/01/2008</b>	<input type="checkbox"/> NO CHARGE FILED <input type="checkbox"/> DISMISSED <input type="checkbox"/> NOT GUILTY <input type="checkbox"/> GUILTY—NO PENALTY <input type="checkbox"/> GUILTY (FELONY REFER J&S REPORT)	
CHARGED <b>Specify the charge if amended, reduced, etc., from arrest offense</b>				
INCLUDED / CONCURRENT / CONSECUTIVE WITH COUNT(S)		FINE <b>Total Amount</b>	FINE SUSPENDED <b>Total Amount</b>	COSTS
DOC COMMITMENT TERM <b>Felony Commitment Time</b>				
JAIL TERM	JAIL SUSPENDED	DEFERRED	CREDIT TIME SERVED	<input type="checkbox"/> SUSPENDED <input type="checkbox"/> DEFERRED (Felony Time Only)
<b>Total Amount</b>	<b>Total Amount</b>	<b>Total Amount</b>	<b>Disregard</b>	<b>Total Amount</b>
<input type="checkbox"/> APPEAL				
OTHER (FTA—WARRANT ISSUED, COMMUNITY SUPERVISION / PROBATION EXTENSION, COURT MANDATE, ETC.)				
COURT CAUSE NUMBER <b>Other details of disposition not included above</b>				
COUNT(S)	UNIQUE NO. (OIN)	DISPOSITION DATE	<input type="checkbox"/> NO CHARGE FILED <input type="checkbox"/> DISMISSED <input type="checkbox"/> NOT GUILTY <input type="checkbox"/> GUILTY—NO PENALTY <input type="checkbox"/> GUILTY (FELONY REFER J&S REPORT)	
CHARGED OFFENSE CODE NO.				
INCLUDED / CONCURRENT / CONSECUTIVE WITH COUNT(S)		FINE	FINE SUSPENDED	COSTS
DOC COMMITMENT TERM <input type="checkbox"/> SUSPENDED <input type="checkbox"/> DEFERRED				
JAIL TERM	JAIL SUSPENDED	DEFERRED	CREDIT TIME SERVED	<input type="checkbox"/> CONDITIONS
<b>Total Amount</b>	<b>Total Amount</b>	<b>Total Amount</b>	<b>Disregard</b>	<b>Total Amount</b>
<input type="checkbox"/> APPEAL				
OTHER (FTA—WARRANT ISSUED, COMMUNITY SUPERVISION / PROBATION EXTENSION, COURT MANDATE, ETC.)				
PLEASE SHOW EXACT AMOUNTS OF FINE, JAIL, COMMUNITY SUPERVISION, PROBATION, AND SUSPENSIONS TO CONTINUE, ATTACH ADDITIONAL DISPOSITION REPORT(S).		RIGHT FOUR FINGERS SIMULTANEOUSLY 		
<b>Indicate the name and Agency Of Disposition Source</b>		SIGNATURE OF PERSON FINGERPRINTED		

# Open Disposition

Research can be done to provide disposition information to close an open arrest

## Disposition Information is provided to WSP by PCN

- A Process Control Number (PCN) is a Unique tracking number linking disposition information to offenses or charges assigned from a fingerprinting event
- PCN guidelines per County have been included on this website
- The PCN is provided to WSP in two ways:
  - Live-Scan submission
  - PCN packet for mailing