

## CITY OF PHOENIX POLICE DEPARTMENT

## **PUBLIC RECORD REQUEST**

		REQUEST INFORMATIO	N	
Date of Request:		Case/Incident Number:		Date of Incident:
Type of Request:	Research Request	O Police Report	O Photograph(s)	MAV (Patrol Car Video)
	O Body Cam	Other (Describe)		
Type of Incident:	Accident	○ Theft	Burglary	Criminal Mischief
	<ul><li>Disorderly</li><li>Conduct</li></ul>	Other (Describe)		
Location of Incident:			Date/Time of Incide	ent:
Name(s) of Person(s)	Involved:			
		REQUESTOR INFORMATION	ON	
Requested By:		DOB:	Telephone Number	:
○ Citizen	○ Involved Party	Attorney	○ Media	Other (Describe)
For Immigration Purp	oses:			
	O I certify that I AM mak	ring this request for the purpose	e of enforcement of fed	eral immigration laws
	O I certify that I AM NOT m	naking this request for the purpose	of enforcement of federal	immigration laws
Mailing Address:		Email:		
Would you like these	records mailed, faxed or p	picked up?		
	○ Mailed	O Picked Up	Faxed to:	
	ACKNOWLI	EDGEMENT & AUTHORIZAT	ION STATEMENT	
that there may be add notified of estimate o that some informatio	ditional fees depending or f cost as well as an estima on or some reports may be ough 192.478) By signing	of the records requested (See in the volume of records, rese tate of any additional costs the e exempt from disclosure pu below, I certify that I have r	earch/search time, ec nat may incur. In addit ursuant to Oregon's pu	ct I will be tion, I understand ublic records
Signature of Requesto	or:		Date:	
without unreasonable delay, a	-	of their requests within 5 business days anticipates reasonable delay to this tin notification.	·	

OFFICE: (541) 535-1113 / FAX: (541) 535-2020

		FEE SCHEDU	LE			
Research Fee:	\$ 10.00 ( for first 30 mins)					
	Anything is excess of 30 mins will be estimated based on salary and fringe benefits of the employee charged with task (such as document research, retrieval, review and/or redaction), coverted to an hourly rate. Time will be charged per hour. Please call police department for an estimate when research or staff time is needed.					
Report / Call Log:	1 -24 pages	\$10.00				
	25-49 pages	\$15.00				
	50+ pages	\$20.00				
Media:	Digital Audio/Photos	Audio/Photos \$15.00 per disc				
	MAV or Body Cam	Starting at \$50.00/hr f	or redacting and proce	ssing		
		DEPARTMENT US	E ONLY			
		Requested Ite	m(s)			
Item	# of Pages / Items	Estimated Cost	<b>Actual Cost</b>			
Call Log						
Incident Report						
Photograph(s)						
Audio/Video Disc(s)						
			Total:			
<b>.</b>				O 011		
Acknowledgment letter given/sent:		Date:	<ul><li>Mailed</li></ul>	Other:		

Audio/video Disc(s)						
			Total:			
				_		
Acknowledgment lette	er given/sent:	Date:	Mailed	Other:		
			○ Verbal			
O No Record Found		<ul><li>Approved</li></ul>				
○ Exempt	The records requested are provided. Portions of the requested records are exempt from disclosure. The exempt material has					
	been redacted or the exempt document is not provided in accordance with:					
	ORS 192.345 (3) Criminal Investigation		ORS 192.355 (2	ORS 192.355 (2)(a) Personal Privacy		
	ORS 192.355 (9) State Law		ORS 419B.035 -	ORS 419B.035 Child Abuse Law		
	ORS 192.355 (8) Federal Law		ORS 181A.830(	ORS 181A.830(2) LE/OR Law		
	ORS 430.399 Tr	reatment or Sobering Facility				
<ul><li>○ Disapproved</li></ul>	The requested record(s) are exempt from disclousure and are not provided in accordance with:					
	ORS 192.345 (3) Criminal Investigation		ORS 192.355 (2	ORS 192.355 (2)(a) Personal Privacy		
	ORS 192.355 (9) State Law		ORS 419B.035 -	ORS 419B.035 Child Abuse Law		
	ORS 192.355 (8) Federal Law		ORS 419A.255 -	ORS 419A.255 Juvenile Records		
Pending / Info						
Needed	The Phoenix Police D.	onartment needs additional ir	oformation/clarification regarding	the request before the DVDD can respond		
	The Phoenix Police Department needs additional information/clarification regarding the request before the PXPD can respond to the request. Requestor was contacted on via phone/mail. New estimated date is:					
Notes:			via prioricy mail. No	.w estimated date is		
Notes.						
Records Released by:			Date:	Cost:		
				Paid:		
Notification Date :			<u>.</u>			
	○ in person ○ vi	ia telephone 🔘 voicemail 🤇	USPS (date mailed:)	○ email		
				-		