



Boone County Sheriff's Office

Request for Public Records Form



REQUEST FOR PUBLIC RECORD		DATE REQUESTED:
Your Name:		
Firm/Organization:		
Address:		
Phone Number:		
IDENTIFY IN DETAIL THE RECORDS/DOCUMENTS THAT YOU ARE REQUESTING: IE: DATE THE EVENT OCCURRED AND/OR WAS REPORTED, ADDRESS/LOCATION, NAMES(S) OF PEOPLE INVOLVED, ETC.		
Date:		
Time:		
Address:		
Name of people involved:		
MAIL/FAX/EMAIL YOUR REQUEST TO:		
Boone County Sheriff's Office		Phone Number: 765-483-5946
Attn: Public Records Officer		Fax Number: 765-483-3370
1905 Indianapolis Ave.		BCSO-admin@co.boone.in.us
Lebanon, IN 46052		
PLEASE NOTE:		
It is the policy of the Department to receive ALL costs associated with a public disclosure request PRIOR to providing the documents. We calculate the actual copying costs based on the following charges and notify you of the total after the requested records are identified.		
Copying Fees:		
\$.10 each	Letter and legal sized documents	
At Cost	Maps, color copies, computer disks, binders, etc.	
At Cost	Postage charges for mailing of requested materials	
\$3.00 each	Field Contact Reports	
\$5.00 each	Accident/Case Reports	
\$6.00 each	Photo CD/DVD/USB	
\$150.00 each	Video Extract	
At the receipt of this document, we acknowledge your request. We have thirty (30) days to respond.		