## Amarillo Police Department formation / Records Request Form

## Information / Records Request Form TO: CUSTODIAN OF RECORDS FOR THE CITY OF AMARILLO POLICE DEPARTMENT

Pursuant to Texas Government Code, Ch. 552, 1 am requesting certain information, specifically:  Non-Public Information: The following information is never public information and will not be released to the public (but, it may eleased to the individual to whom it belongs): date of birth, Social Security number, driver's license number, vehicle license plate nu VIN number, and financial account numbers.  OPTIONAL Request for Expedited and Redacted Information: (Check the box for an expedited request) According to Texas law, we cannot release certain information includes a value of a days. That information includes, but is not limited to, certain witness, suspect, arrestee, and complainant information; uvenile information; sexual assault information; and child abuse information. If that type of information is included in your request, ben we must request an Attorney General opinion before providing any information to toy us. But, if you are complained by own the remainder of the information which we can more promptly give you the remainder of the information you have equested without taking the time to contact the Attorney General. If this is acceptable to you, then please check this box, and the annually Police Department will remove any such information from the information you receive.  CHECK ONE BOX  MADE AVAILABLE TO ME FOR EXAMINATION ONLY. The custodian may schedule an appointment within a reasonable time for my examination of the information. I understand that I must complete my examination within ten days after the date the record are made available to me.  COPIED OR DUPLICATED for me (See back for charges).  CHECK ONE BOX  MAILED to me at the address indicated above. (See back for charges).  PICKED UP by me or my representative when you advise the information is ready.  FAXED to me at  I agree to pay the costs of photocopying, duplication, the labor costs involved in retrieving information that is not readit available or in need of redacting, and the cost of mailing or faxing. In the event the estimated	FROM: Name:		ID/DL #:	
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Signature Required:Date:	Signature Required:		Date·	

## THIS SIDE TO BE COMPLETED BY CITY PERSONNEL ONLY:

(1) Date City Received:	(2) Date City Responded:
(3) Date Picked Up, if applicable:	(4) Payment info:

CHARGES PER ITEM	NUMBER	TOTAL
Standard-size: Paper Copies (up to 8½ x 14) Microfiche - Paper Copies Motor Vehicle Accident Report	@ \$.10/page @ \$.10/page @ \$6.00/each	\$ \$ \$
Nonstandard-size:  Diskette Rewritable CD (CD-RW) Non-rewritable CD (CD-R) Digital video disc (DVD) Other electronic media (Actual Cost) Oversize Paper (larger than 8½ x 14) Specialty Paper (Actual Cost) Photographs (Actual Cost) Other Charges:		\$
Labor charge: For Programming For locating, compiling, reproducing & redacting (More than 50 pages)  Overhead Charge – 20% of Labor Charge.	@ \$28.50/hr. @ \$15.00/hr. @ 20%	\$ \$ \$
Computer Resource Charges:  Mainframe PC or LAN	@ \$10.00/min. 	\$ \$
Miscellaneous Supplies & Charges:  1) 2) 3)		\$ \$ \$
Postage/Shipping Charges:	Actual Cost	\$
TOTAL CHARGES: (No Sales Tax)		s

Additional Information:	