



# Cumberland County Sheriff's Office

## Release of Public Information



<b>Case #</b> _____	<b>Date(s):</b> /    /	<b>Through</b> /    /
<b>(If applicable)</b>		
<b>Victim(s) Name:</b> _____	<b>Date of Birth:</b> /    /	
<b>Complainants' Name:</b> _____		
<b>Incident Address:</b> _____		
<b>(No PO Boxes)</b>		
_____	<b>Phone:</b> _____	
<b>Type of Incident:</b> _____		
<b>(Accident Report, Call for Service, Etc.)</b>		
<b>Location:</b> _____		

**This information is released for the express purpose stated on this form. The requesting person is liable for any further dissemination of information contained in the report.**

**Fee: 1-7 pages is \$12.00, for each additional page \$1.00, color photos printed on paper \$2.00/each. Routine Accident Reports: \$12.00. Reconstruction Accident Reports: Follows same formula for paper copies and/or photos. Non-paper requests (VHS, DVD, CD, Audiotapes, etc.), \$25.00 for each media form request.**

**Pre-payment must accompany request(s), unless other satisfactory arrangements have been made with the records clerk. Processing Time: 5 Business Days.**

**Payments:   Cash – Exact Change  
                  Checks – Made out to Cumberland County Sheriff's Office**

**Payment Due At Time of Pick-Up or Prior to Mailing.**

**Available Pick-up times: Monday – Friday 8:00 a.m. – 4:00 p.m.**

**Paid:   Yes   No   **Receipt #:****

**OPTIONAL INFORMATION:**

**Requestor's Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Requestor's Mailing Address:** \_\_\_\_\_

**NOTE: Requestor does not have to provide any of the above optional information. If they wish not to, than the request must be picked up.**