


# PUBLIC RECORDS (APRA) REQUEST CITY OF SOUTH BEND

Name of Requesting Party:			
Address:		City:	State: Zip:
Telephone:	Date of Request:	Time of Request:	Submitted (check one): <input type="checkbox"/> In Person <input type="checkbox"/> Mail, Email or Facsimile
Email of Requesting Party:		Signature of Requesting Party: 	
Name of Department having records, if known (i.e. Police, Building, Fire/EMS, Public Works):			
Records Requested. Please be specific. Use the back of form if additional space is needed. <hr/> <hr/> <hr/> <hr/>			
<b>Check one:</b> I request to <input type="checkbox"/> INSPECT or <input type="checkbox"/> BUY copies of the records requested.			
<b>Check one:</b> I request to receive my records by: <input type="checkbox"/> in-person pick-up; or <input type="checkbox"/> REGULAR MAIL; or <input type="checkbox"/> EMAIL; or <input type="checkbox"/> FAX			

**\*\*\* SUBMIT REQUESTS TO THE LEGAL DEPARTMENT ([apra@southbendin.gov](mailto:apra@southbendin.gov)) \*\*\***

## CITY OF SOUTH BEND USE ONLY

Request Received By:	Department:	Date and Time Received:
<b>Acknowledged Receipt:</b> <input type="checkbox"/> Email <input type="checkbox"/> Telephone <input type="checkbox"/> In Person Acknowledgement Form		
<b>Department Comments:</b> <hr/> <hr/>		
<b>ATTORNEY DECISION</b>		
INFORMATION IS _____ DISCLOSABLE		INFORMATION IS NOT DISCLOSABLE _____
Attorney Comments and Instructions: _____ <hr/>		
Attorney Signature: _____		Date of Decision: _____
Letter sent (Date): _____	Decision Sent To: _____	Date: _____ By: _____
Informed requesting Party that information is _____ DISCRETIONARY DISCLOSURE or _____ NON-DISCLOSABLE		
Date: _____	Signature: _____	<input type="checkbox"/> In Person <input type="checkbox"/> By Telephone <input type="checkbox"/> By Email

To Whom It May Concern:

Pursuant to the Indiana Access to Public Records Act, I hereby request the following records:

A copy of the current contract between this department, the city, and ShotSpotter, Inc. This request includes the full ShotSpotter Services Agreement, Standard Terms and Conditions, terms of service (including square miles covered, total cost, and contract beginning and end dates), any reference service level agreements, contract amendments, cure notices, non-disclosure agreements, or other revisions to agreements.

The requested documents will be made available to the general public, and this request is not being made for commercial purposes.

In the event that there are fees, I would be grateful if you would inform me of the total charges in advance of fulfilling my request. I would prefer the request filled electronically, by e-mail attachment if available or CD-ROM if not.

Thank you in advance for your anticipated cooperation in this matter. I look forward to receiving your response to this request within 7 business days, as the statute requires.

Sincerely,

Katie Ryan