



# City of Council Bluffs Records Request Form

**REQUESTOR'S INFORMATION** (please print)Name: Samuel SinyangweCompany Name (if applicable): N/AMailing Address: MuckRock News, DEPT MR158371, 263 Huntington Ave, Boston, MA 02115Daytime Phone: 617-299-1832 Alternative Phone: \_\_\_\_\_Email address: 158371-11802548@requests.muckrock.com**INFORMATION REQUESTED** (Please be as detailed as possible; include names, report and case numbers, dates, subjects, meeting dates, resolution, ordinance numbers, project names, etc.)

Please see next page for full request.

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**ACKNOWLEDGMENT**

Iowa Code Chapter 22 gives every citizen the right to examine public records and to copy those records unless their access is expressly prohibited. The City of Council Bluffs staff should not be expected to abandon or neglect their regular public duties to comply with records requests and thus need sufficient time to make and deliver any requested information. If the requested material potentially contains confidential information or otherwise exempt from disclosure, additional time may be required for review and possible redacting of the material. All requests will be processed in accordance with applicable procedures and rules. Note: If a deposit is required, no work will begin on the request until a minimum of 50% of the estimated deposit is received. Total amount of time is subject to change based on actual time. I have read and reviewed the "Fees" on page 2 and agree to pay any applicable fees.

Raj For Samuel Sinyangwe  
Signature and Printed name of Requestor

02/08/2024  
Date of Request

**CUSTODIAN OF RECORDS AND CITY ATTORNEY APPROVAL:**

Department
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Approve \_\_\_\_\_ Deny \_\_\_\_\_

Reason for denial or condition of approval: \_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_ Custodian's Signature \_\_\_\_\_

City Attorney
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Approve \_\_\_\_\_ Deny \_\_\_\_\_

Reason for denial or condition of approval: \_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_ City Attorney's Signature \_\_\_\_\_

**FEES (for office use only)**

Copy Charges: \_\_\_\_\_ B/W pages \$10.00 for the first page + \$0.50 for add'l pages = \$ \_\_\_\_\_  
\_\_\_\_\_ color pages \$10.00 for the first page + \$0.75 for add'l pages = \$ \_\_\_\_\_  
oversize pages (to be determined case by case) = \$ \_\_\_\_\_

Documents Scanned and sent via Email: \_\_\_\_\_ pages x \$0.25/page = \$ \_\_\_\_\_

Electronic Files Burned to CD, \$10.00 per CD = \$ \_\_\_\_\_

Postage Charges: \_\_\_\_\_ actual cost = \$ \_\_\_\_\_

Other (please specify): \_\_\_\_\_ actual cost = \$ \_\_\_\_\_

Other (please specify): \_\_\_\_\_ actual cost = \$ \_\_\_\_\_

Staff Services: (first 15 minutes free per request) specify redacting time, search time, supervision of records examination, copy time, etc. \_\_\_\_\_

Name of Employee (s) Performing these services: \_\_\_\_\_

(Department Staff, IT Staff, Finance Department Staff, etc.)

\_\_\_\_\_ hours (1/4 hr increments, less 1/4 hr) x \$ \_\_\_\_\_ employee hourly rate = \$ \_\_\_\_\_

\_\_\_\_\_ hours (1/4 hr increments, less 1/4 hr) x \$ \_\_\_\_\_ employee hourly rate = \$ \_\_\_\_\_

**POLICE DEPARTMENT FEES, PER CHAPTER 2.08.040 – SCHEDULE OF FEES**

Reports \$10.00	Supplemental Reports \$0.50 per page
DVD \$30.00	Records check \$10.00

**TOTAL BALANCE DUE - \$ \_\_\_\_\_**  
**(NET 30 DUES)**

**MAKE CHECKS PAYABLE TO:** CITY OF COUNCIL BLUFFS  
209 PEARL STREET  
COUNCIL BLUFFS, IOWA 51503

**PLEASE RETURN A COPY OF THIS PAGE WITH REMITTANCE**

DEPT. \_\_\_\_\_ REVENUE/REIMBURSEMENT CODE \_\_\_\_\_

**Details of Request (for office use only)**

Request Received via: \_\_\_ Email \_\_\_ Fax \_\_\_ Mail \_\_\_ In Person

Request Submitted on: \_\_\_\_\_ (include date and time)

Department/Employee Receiving Request: \_\_\_\_\_

Routing Information: \_\_\_\_\_

\_\_\_\_\_

To Whom It May Concern:

Pursuant to the Iowa Open Records Law, I hereby request the following records:

1. the total number of use of force incidents reported from 2017-2022, separated by year.
2. the total number of use of force incidents, separated by type of force and year, from 2017-2022 (for example, information that specifies the number of taser incidents in 2022, baton incidents in 2022, taser incidents in 2021, baton incidents in 2021, etc.)
3. the total number of civilian complaints against law enforcement that were reported and the total number sustained from 2017-2022, separated by year.
4. the total number of civilian complaints alleging law enforcement use of excessive force that were reported and the total number sustained from 2017-2022, separated by year.
5. the total number of civilian complaints alleging biased policing or racial profiling that were reported and the total number sustained from 2017-2022, separated by year.
6. the total number of civilian complaints alleging criminal conduct that were reported and the total number sustained from 2017-2022, separated by year.
7. the total number of officer-involved shootings from 2017-2022, both fatal and non-fatal, separated by year.
8. the total number of people who police used force against in 2022, broken down by race/ethnicity.

When available, I would appreciate being sent individualized data in this request in spreadsheet format. If individualized data are unavailable, please send information that includes aggregate statistics for the item instead.

Note that my requests for civilian complaints are specifically for civilian complaints, please do not include complaints filed by one officer/the department against another officer.

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 10 business days, as the statute requires.

Sincerely,

Samuel Sinyangwe