***RECORDS REQUEST FORM***

*Attention: Please complete the following information to initiate your Polk County Sheriff’s Office Records Request. To help us better serve you, make sure all information pertaining to the Records Request is provided. Once complete, simply return this Records Request Form by the method of request below. Should you have any questions, please contact the Records Processing Unit at (863) 298-6300, or you may visit our office at the address above. Records Request Forms may be e-mailed to:* [*recordsrequest@polksheriff.org*](mailto:records@polksheriff.org)*.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Incident # | |  |  | | | | Date: | August 7, 2018 |
| Per your request, the following information is being forwarded to you via: | | | | | | | | |
| E-mail: | 58879-28749540@requests.muckrock.com | | | Mailing  Address: | | DEPT MR 58879  411A Highland Ave Somerville, MA 02144-2516 | | |
| Phone #: | 6106377745 | | |  | | |
| Fax #: |  | | |  | |  | | |
| MuckRock News | | | |  | Email | | | |
| Name of Company  (If Applicable)  6106377745 | | | |  | Method of Contact | | | |
|  | 58879-28749540@requests.muckrock.com | | | |
| Phone Number | | | |  | E-mail Address | | | |

PCSO Records Use Only:

Records Member Processing: Total Due by Customer $

Date/Time Received:

Invoicing Totals:

Copies Made: Fingerprint Cards:

Postage Costs: Records Check:

Research Fee: CD's:

Photos: