| Request Date: 3/24/2022 | Requestor Name: Tod | Requestor Name: Todd Feathers | |
|--|--|---|--|
| Company/Agency Name: The M | arkup | | |
| Address: 337 1st Ave. #2 New | York, NY 10003 | | |
| Phone: 608-698-5806 | Email: todd.feathers | Email: todd.feathers@themarkup.org | |
| Date of Incident: N/A | Time of Incident: | County: | |
| Location of Incident: | | | |
| Trooper Name: | Badge #: | Troop: | |
| Individuals involved: | | | |
| Document(s) Requested: | | | |
| _ | ollision Case Noements, vehicle downloads, third party repor | ts, etc Pursuant to Open Records Act Title 51 | |
| ☐ Arrest Report – Arrest Dat | e: | | |
| ☐ CAD Report – Event Deta | il (dispatch report) | | |
| ☐ Driver/Vehicle Examination | on Report | | |
| ☐ Emails/Correspondence | | | |
| □ Statistics | | | |
| X Other: | | | |
| Additional Details: Please see the request inc | | | |
| Requestor Signature: Todd | Feathers | | |



Department of Public Safety Records Management Division – Open Records Open Records Request

Form Instructions

Please complete all applicable portions of the Open Records Request Form.

Print and Mail the form to:

Department of Public Safety Records Management Division - Open Records PO Box 11415 Oklahoma City OK 73136-0415

All documents are redacted according to the Driver's Privacy Protection Act, 18 U.S.C. Sections 2721 through 2725 and the Oklahoma Open Records Act, 51 O.S. § 24A.1 et seq.

Once documents are available, an invoice will be mailed or e-mailed to the requestor's address provided on the Request Form. Documents will be released upon receipt of payment to DPS.

| Fees: | Page | \$ 0.25 |
|-------|-----------------------------|------------|
| | Certified Document | \$ 3.00 |
| | Collision Report (Redacted) | \$ 7.00 |
| | Disc | \$ 5.00 |

To request Dash Cam and any other audio/video files, please submit the request separately on the Dash Cam Video Request Form. This form is located on our website at www.ok.gov/dps.