OPEN PUBLIC REPORT COPY AND BACKGROUND CHECK REQUEST

Please check one: Report Copy____ Background Check _____
Notarized: Yes _____

Request for information must be in writing. Reports from another agency and other investigative information within the reports remain the property of the originating agency and will not be released.

FEE SCHEDULE: CASH, CASHIER'S CHECK, OR MONEY ORDERS ACCEPTED. payable at time of request.

Report Copy	$20.00 each
Research/Background Check	$30.00 each
Photos	$40.00 each CD

Additional fees may apply to larger reports per City fee schedule.

POLICE DEPARTMENT

555 NE 15TH STREET
PO BOX 118
BEND, OR 97701
[541] 322-2960 TEL
[541] 312-1934 FAX
WWW.CI.BEND.OR.US

Please fill out a separate form for each person of interest or report.

TO ASSIST US IN LOCATING THE INFORMATION YOU ARE REQUESTING, PLEASE PROVIDE AS MANY DETAILS AS POSSIBLE.

For Report Copy, please provide:

Case Number AND/OR Name and Date of Birth:

_____

Date, Time and Location of occurrence:_____

Reason Requesting Report:_____

For Background Check, please provide:

Name and Date of Birth of person of interest:

_____

AKA: Also Known As (has this person gone by any other name)

_____

JIM CLINTON *Mayor*
JODIE BARRAM *Mayor Pro Tem*
VICTOR CHUDOWSKY *City Councilor*
DOUG KNIGHT *City Councilor*
SALLY RUSSELL *City Councilor*
MARK CAPELL *City Councilor*
SCOTT RAMSAY *City Councilor*
ERIC KING *City Manager*
JIM PORTER *Police Chief*

CONDITIONS:
All public Records Act requests by non-public safety agencies or individuals must be specific as to what information is being requested. The form in which the information is provided will be determined by the Bend Police Department. Any reports that involve an arrest and are currently under prosecution with the District Attorney's office or Juvenile Department will not be released. Any open investigation with the Bend Police Department or District Attorney's Office will not be released. Upon receiving this written request, The Bend Police Department shall collect the search and copy fees. Information released will be reviewed and redacted per applicable State and Federal Laws.

The Public Records Law affords an agency a reasonable time to respond to a request.

Printed Name of requestor _____ **Date** _____

Signature of requestor _____ **Phone** _____

Email/Mailing Address_____

Received by _____ Date _____ Amount Due/Paid_____

Completed by _____ Date _____