



# Sweet Home Municipal Court Request for Public Record

Today's Date:	Requestor Name:	
Contact Phone Number:	Requestor's Agency: (if applicable)	
Email Address:		
Requestor Address, City, State, & Zip Code:		
Requestor Signature:		

**Municipal Court Request for Copies:** *Only the Sweet Home Police Department can provide police and incident reports. Inquiries for such items should be directed to 541-367-5181.*

Check one:  Misdemeanor Reports     Violation Reports     Other

Defendant's Name: \_\_\_\_\_

Case Number: \_\_\_\_\_ PD No: \_\_\_\_\_ Date of Incident: \_\_\_\_\_

**Specific Public Records/Information Request:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Format Requested:</b> <input type="checkbox"/> Photocopy <input type="checkbox"/> Electronic <input type="checkbox"/> Other (Specify) _____
How would you like to receive the request? : <input type="checkbox"/> Mail <input type="checkbox"/> Will Pick-up
When would you like to receive request by?: _____