



DOUGLAS COUNTY SHERIFF'S OFFICE

Justice Building • Roseburg, Oregon 97470
(541) 440-4450 | dcso.records@co.douglas.or.us

JOHN HANLIN
SHERIFF

To receive a copy of any report or record from the Douglas County Sheriff's Office you must make a written request or complete this form. You must also pay the required fees. (See fee schedule below)

REQUESTOR NAME _____ PHONE _____

MAILING ADDRESS _____ DATE OF REQUEST _____

EMAIL ADDRESS _____

NAME OF PERSON/S INVOLVED: _____ DOB/ _____

_____ DOB/ _____

DATE/TIME OF INCIDENT: _____ CASE # _____

TYPE/NATURE OF INCIDENT: _____

LOCATION OF INCIDENT: _____

I AM REQUESTING THE FOLLOWING RECORDS: POLICE REPORT [] LOG ENTRY [] CRIMINAL HISTORY []

DISPATCH INCIDENT LOG [] AUDIO 9-1-1/NON-EMERGENCY [] RADIO TRAFFIC: LAW [] FIRE []

OTHER-EXPLAIN _____

Face Sheet or Single Page Report:	\$ 5.00
Reports up to 6 pages:	\$ 8.00
Each Page over 6 pages:	\$.25
Photos	\$ 15.00
Research	\$ 25.00/ per processing hour (billed in 15-minute increments)
Body Worn Camera Video:	Requires subpoena
Research Deposit Fee:	\$ 10.00
Dispatch Communications Audio	\$ 30.00 1st hour, \$25 each additional hour. (billed in 15-minute increments)

Staff will review and estimate the amount of time necessary to fulfill your request. Your request may take a minimum of three days to process. A research fee may be assessed dependent on the type of record requested. This research fee must be paid prior to staff beginning the research process. Additionally, an estimate of the actual costs will be made, and that amount may be required to be pre-paid at the time the request is made. If the actual cost of providing the records is less than the estimate, a refund will be given. If the actual cost exceeds the estimate, the balance must be paid prior to the department releasing the requested records. You may be required to pay the costs of processing your public records request even if no records are found, or if the records are exempt from disclosure. Research fees are configured in 15-minute increments.

(FOR OFFICE USE ONLY)

Copy of report provided _____ No Record Found _____ Case No's _____ Redacted _____ DA Auth _____

Fees Paid \$ _____ Date Mailed _____ Clerk Initials _____ Supervisor Initials _____