



Tulsa County Sheriff's Office

Request for Copying or Inspection of Public Records

Name of Requestor (**Printed**)

Date

Mailing Address

Telephone Number

This request is for ___ **inspection** or ___ **copying** (please check one) of the following described records pursuant to the Oklahoma Open Records Act *51 O.S. §§ 24A.1 et seq.*

<u>Record Title/Date</u>	<u>Number of Copies</u>
1. _____	_____
2. _____	_____
3. _____	_____

Attach additional pages to this form if your request includes more than three documents. The requested information will be used for ___ **business** or ___ **personal** purposes (please check one).

I have been advised that a charge for copying public records is authorized by state law and has been established by Tulsa County.

Signature of Requestor

Business Name and Title (If Applicable)

Internal Use Only

Request Date: _____ Request Time: _____ Search Fee Charged: Yes ___ No ___

Copies Made: _____ DVD/Audio: _____ Other Digital Media: _____

Total Charges: \$ _____ Deposit Held: \$ _____ Total Amount Paid: \$ _____

The following records were NOT produced for the reasons indicated (use additional pages if necessary).

<u>Record</u>	<u>Reason</u>
1. _____	_____
2. _____	_____
3. _____	_____

Completed: _____
Signature of Record Custodian

Date: _____