

HUMBOLDT COUNTY SHERIFF'S OFFICE

RECORDS SECTION

REQUEST FOR RECORDS

NOTE: Please be advised that there may be a fee associated with the production of records.

Please check the box that applies:

I am the:	<input type="checkbox"/> Victim	<input type="checkbox"/> Suspect	<input type="checkbox"/> District Attorney	<input type="checkbox"/> FBI	<input type="checkbox"/> DTF	<input type="checkbox"/> EPD
	<input type="checkbox"/> Insurance Company	<input type="checkbox"/> Other: _____				
I am requesting:	<input type="checkbox"/> Copy of Case	<input type="checkbox"/> Copy of photos from case	<input type="checkbox"/> Mugshot	<input type="checkbox"/> Booking information		
	<input type="checkbox"/> Other: _____					

If known, please provide:

Case Number: _____ SA#: _____

If you do not have a Case # or SA#, please provide the following:

Name: _____ Victim Suspect Other DOB: _____

Date of occurrence: _____ Location of occurrence: _____

Additional information: _____

Please provide your contact information: (Please print legibly, indicating whether you wish to receive records by U.S. Postal Service or Email)

Name: _____

Address: _____

Phone Number: _____

Email: _____

Please check how you would like to receive the report: Email * U.S. Postal Service Pick Up in Person

Signature of Requester

Phone #

Date

FOR RECORDS USE ONLY

Date Received: _____

Date Processed: _____

Processed By: _____
Signature

Pin#: _____

Based on information furnished, I was unable to locate a report.

Notes: _____
