



**CITY OF FRANKFORT
POLICE DEPARTMENT**

201 W. WASHINGTON STREET
FRANKFORT, INDIANA 46041-1859
PH. 765-654-4245
FAX 765-654-9197

CHRIS McBARNES
MAYOR
TROY BACON
CHIEF
SCOTT SHOEMAKER
DEPUTY CHIEF

**PUBLIC RECORDS REQUEST
TO INSPECT OR COPY A LAW ENFORCEMENT RECORDING**

Return to:
Records Clerk
Frankfort Police Department
201 W Washington Street
Frankfort, Indiana 46041
FAX: 765-654-9197
Email: cmoore201@frankfort-in.gov

Name of Requesting Party: _____ DOB: _____

Company Name (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: _____ email: _____

- Date and approximate time of the law enforcement activity: ____/____/____
:____AM/PM
- The specific location where the law enforcement activity occurred:

- The name of at least on (1) individual, other than a law enforcement officer, who was directly involved in the law enforcement activity:

Date of Request: _____ Your Signature: _____

<i>Inter-Office Use Only</i>	
Date of Request Received _____	Date of Request Denied _____
Employee Handling Request: _____	Reason for Denial: _____
Amount Charged (if applicable): \$150.00	Payment Collected and Processed: _____
Date of Request Filled: _____	

EMERGENCY
9-1-1

CRIMINAL INVESTIGATIONS
654-4277

NON EMERGENCY
654-4431