



**REQUEST FOR PUBLIC RECORDS**

(Please complete blanks and check appropriate boxes)

To the Custodian of Records: I am requesting

Actual Copies of *(There are charges imposed for all copies as set by the County of Sandoval.)*

To View *(There are no costs imposed for viewing.)*

the following:     Incident Report                       Audio/Visual Records

Incident Report with attachments     Other (Describe below.)

for Sandoval County Sheriff's Office Case Number. \_\_\_\_\_.

*(If a case number is not known, provide incident descriptors such as date, time, location or parties involved.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Request By: \_\_\_\_\_

Name \_\_\_\_\_

Agency \_\_\_\_\_

Address \_\_\_\_\_

Contact Phone Number \_\_\_\_\_

*The Inspection of Public Records Act is intended to provide the public with access to information on governmental affairs. The law requires public access to virtually all public records, with a few exceptions such as personnel records containing matters of opinion, medical records or on-going criminal investigations. Records may or may not be readily available, but will be provided in accordance with the New Mexico Inspection of Public Records Act. We will respond to your request no later than \_\_\_\_\_.*

*If the records cannot be compiled by that date, we will notify you in advance with an expected date the records will be available. Also, any associated charges must be paid, in the form of cash, check or money order, made out to Sandoval County, before the records are released.*

**I acknowledge receipt of the requested documents and/or audio/video records.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date