



LORAIN POLICE DEPARTMENT

DUTY • HONOR • COURAGE • LEADERSHIP

Michael Failing
Chief of Police

PUBLIC RECORD REQUEST FORM RC 100

Filling out this form will help us provide the public records that you are requesting in a timely manner

Name of requester:	
Requester's address:	
Phone Number (including area code):	Today's date:
Please indicate the records you want to review, PLEASE PRINT:	
Please indicate your preference for receiving the records below:	
<ul style="list-style-type: none"><input type="radio"/> I would like to inspect these records at the Lorain Police Department when they are ready.<input type="radio"/> I would like these records copied and I will pick them up when they are ready.<input type="radio"/> I would like these records copied and mailed to me at the address on this form.	
Name of department employee handling this request:	Date request was completed: