



Holmes County Sheriff's Office Public Record Request Form

8105 Township Road 574, Holmesville, Ohio 44633—(330) 674-1936

This form is provided to you as a courtesy when requesting Public Records from the Sheriff's Office. You are not required to complete this form in order to receive the records you are seeking. You do not have to tell us your name, provide your address or any other personal identification. If you choose, you can complete only the portions of the form that will help us locate the specific records you are seeking and leave the remainder of the form blank. Our goal is to make every effort to serve you in providing the records you're looking for in accordance with State and Federal Law, and do so in a timely manner.

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ - _____ Cell: (____) _____ - _____

Email address: _____

Please describe the Record(s) you are looking for in as much detail as possible. Include the type of Record (accident, incident, offense report, etc.) if known. Include a date and a time if known, or if not, please try to include a timeframe with a beginning and ending date. Include the name of the Officer (s) involved if applicable and if known. If you are looking for specific records or occurrences, please include that information as well, as it is always helpful if we know exactly what you're trying to find. Redacted information as required by law will be plainly marked and include an explanation if necessary.

Signature of person requesting record (not required): _____

FOR INTERNAL USE ONLY:

Person completing form: _____

Date this request received: _____ Time received: _____

Received by : _____ Forwarded to: _____

Date and Time completed and requestor notified if picking up: _____

If sent to requestor, date, time, and method of shipment: _____