## **MORROW COUNTY SHERIFF**



325 Willow View Drive • P.O. Box 159 Heppner, Oregon 97836 Phone: (541) 676-5317 Fax: (541) 676-5577

John A. Bowles, Sheriff Brian L. Snyder, Undersheriff

Date: \_\_\_\_\_

## **Public Information Request Form**

Mailing address:	
Phone #:	Email Address:
I am requesting the fol	lowing public records from the Morrow County Sheriff's Office.
(Please be as specific as p	ossible with names, dates and type of records you are requesting.)
law (ORS 192.345) and in able to fulfill your reques to make records available must be paid prior to accord	regarding public information contains exemptions to the public records certain circumstances the Morrow County Sheriff's Office might not be to Pursuant to ORS 192.324, a public body may charge reasonable fees as well as reproduction charges, if applicable. All fees or deposits essing the records. Requests will normally be processed through the nday-Friday 8am –5pm). If emailing, send to MCSORecords@co.morrow.or.us
	OFFICE USE ONLY
	Received by: Case/Incident Number:
If necessary: Emailed DA: _	DA approved or denied:
Information sent:	
Amount Due \$	Check # Cash \$ Receipt #
Completed by:	Date completed: Sent via: