

Department of Public Safety

OFFICE OF THE COMMISSIONER Walt Monegan

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Request for Public Information

Under state regulations, you as an individual, or private corporation, political subdivision, government agency, municipality, partnership, association, firm, trust, estate, or any other entity whatsoever have the right to submit a request to the state agency for public information.

This state agency's records must be disclosed to the requestor in a timely manner provided the requested records are not:

- 1. Covered under a valid Alaska or federal statute or regulation, or by privilege, exemption, or principle recognized by the courts, or by an agency protective order authorized by law.
- 2. Infringing on the rights of any other person or entity.
- 3. Impairing the functions of any agency.

Please complete the following:

Copies of records, photos, and/or audio are provided at the requestor's expense. If you are requesting more than one record, it is possible that your request will be completed by multiple regional offices.

Name:					
Company:					
Mailing Address:			Suite/Apt #	:	
City:	State:		Zip Code: _		
Phone#:	Fa:	x#:			
E-mail Address:					
If request is for records or r			ng:		
			Date of incident:		
Do you want photos? Yes			Yes	No	
How would you like to recide the for pickup, where would				Fax	Pickup
Signature:		Dat	·e·		

Request for Public Information

Details (cont):