



Open Records Act Request

Media

General Public

Information Requested: Please state with specificity the nature of your request, the records you seek, and the applicable time frames.

Purpose of Request: Personal

Commercial

Public Interest

Name of Person Making Request Please Print

Address

City

State

Zip

Email Address

Cell Phone

If this is a media request, who are you affiliated with

Signature

Date

Note: If fees apply pursuant to the Oklahoma Open Records Act, 51 O.S. Ss 24A.1 – 24A.31 you will be notified before any search is conducted. Do not send money prior to receiving notification of applicable fees and the exact amount due.

Return form to:

Okarche Police Department

300 W. Colorado

P.O. Box 116

Okarche, OK 73762

E-mail: contact@okarchepd.com

Phone: (405)263-7972

Fax: (405)263-4937