OPEN RECORDS ACT REQUEST

Johnston County Sheriff's Office

☐ Media ☐ General Public ☐ Other, explain: _____

Person making the Request:

Name: _____

Organization: _____

Address: _____

Phone: _____

Email: _____

Purpose of Request: ☐ Personal ☐ Commercial ☐ Public Interest

Information Requested: Please state the specific nature of your request and the records that you seek. If the precise timing of the incident is not known, please provide an approximate date and time frame for authorized personnel to aid in locating the targeted information.

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Signature **Date**

You will be notified of any applicable fees pursuant to the Oklahoma Open Records Act, 51 O.S. §§ 24A.1 - 24A.30. Do **NOT** attempt to make payment prior to receiving notification of applicable fees and the exact amount due.

RETURN FORM TO:

Johnston County Sheriff's Office
Attn: Shelly Carter
110 N. Capital Ave.
Tishomingo, OK. 73460
(580) 371-2646 ph.