



Ashland Police Department
 1155 E. Main St.
 Ashland, OR 97520
 Ph: 541-482-5211 Fax: 541-488-5351



Discovery Request

(Non-Attorney Trials Only)

I, _____, request discovery for my case:
 (Print Name)

I am requesting the following items for discovery for APD Case #: _____
 and/or Citation #: _____.

- | | | | |
|---|---------|--|---------|
| <input type="checkbox"/> Body Worn Camera | \$19.00 | <input type="checkbox"/> Officer's Notes | \$12.00 |
| <input type="checkbox"/> Mobile Audio Video | \$19.00 | <input type="checkbox"/> Officer's Training Record | \$5.00 |
| <input type="checkbox"/> Laser Video | \$19.00 | <input type="checkbox"/> Police/CAD Report | \$12.00 |
| <input type="checkbox"/> Radar/Laser Certifications | \$5.00 | <input type="checkbox"/> Photos on CD | \$19.00 |

If your request is extensive, you may be notified of additional fees.

Your request **will not** be processed until payment has been received by the Ashland Police Department and can take 7 – 10 business days to complete.

We are not permitted by law to give legal advice.

Contact Information:

Phone: _____ E-Mail: _____

Address: _____

Signature _____

Date _____

Office Use Only

Request received on _____ and Total paid: \$ _____

to _____.

Request given to Officer _____ for processing on _____.

Notification of completion given by _____ on _____.

Date picked up / e-mailed: _____ by _____.