

Alameda County Probation Department Public Records Act Request



Alameda County Probation Department Use Only:

Control #:	Date Assigned :
Assigned to Division:	Date Completed:
Notes:	

I request to inspect, in accordance with California Government Code § 6250 et seq., and the Guidelines for the Inspection of Public Records, established by the Alameda County Probation Department, records of the following name or type, maintained by Alameda County Probation Department.

Name of Record(s) or Description of Subject Matter:

Note: If additional space is needed, please staple additional information on size 8.5 by 11 inch paper to this form.

Please check the appropriate box below:

Please contact me when the records are available for inspection.

Reproduce a complete copy of the above named record for my use. I agree to pay postage and 10 cents per page for standard black and white print.

ACPD fees are similar to witness fees in Evidence Code § 1563.

Requestor's Name (Printed):	Requestor's Signature:	Date of Request:

Address	
City, State	
Zip Code	

Requestor Telephone Number(s):	Requestor's E-Mail Address:

Upon completion, this form may be emailed to inforequest@acgov.org by clicking the button or mailed to the following address:

Alameda County Probation Department
Attention Public Records Act Request
P.O. Box 2059
Oakland, CA 94604