



SENECA POLICE DEPARTMENT

CASEY BOWLING
INTERIM CHIEF

FREEDOM OF INFORMATION ACT REQUEST FORM: When completing the form below please print the requested information.

Date of Request: _____

Name: _____

Address: _____

City: _____ State _____ Zip _____

Phone Number: _____

E-Mail Address: _____

When completing the request, it is VERY important to be as SPECIFIC AS POSSIBLE. Your request may be delayed if you are not clear about the information you are seeking.

Information Requested/Detailed Description:

Date: ___/___/_____ to ___/___/_____

§30-2-50 prohibits a person or private entity from knowingly obtaining personal information from a local government or other political subdivision for commercial purposes. Violators are guilty of a misdemeanor and upon conviction are subject to a \$500 fine and/or jail time up to one year.

§23-1-240 (G) (1) states that data recorded by a body-worn camera is not a public record subject to disclosure under the Freedom of Information Act.

By signing below you are acknowledging that you have read the above statement regarding § 30-2-50.

Signature: _____

Name (printed): _____