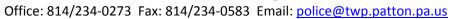


PATTON TOWNSHIP POLICE DEPARTMENT

100 Patton Plaza, State College, PA 16803





Standard Act 22 Request Form (Police Audio and Video)

Date Requested:	
*Written request must be made within sixty (60) days of the date of the recording	
Request Submitted by: Certified U.S. Mail In Person	
Request Submitted to: Patton Township Police Department, Open Records Officer Tyler Jolley 100 Patton Plaza, State College, Pa 16803	
Name of Requester:	
Street Address:	
City/State/County/Zip:	
Telephone: Email:	
Records Requested: *Provide as much specific detail as possible so the agency can identify the information requested. Date (Required):	
Time (Required):	
Location (Required): *If the requested incident took place inside a residence, every per present at the time of the recording must be identified, unless unknown and not reason ascertainable. (Attach Statement if more space is required)	nably
Relationship to requested event/recording (Required): (Attach statement if more space required)	ce is
Please note: RETAIN A COPY of this request for your files	
It is a required document if you would need to file an appeal	
For Agency Use Only	
Date Received by Agency:	
Agency timity (30) business day response due	
Disposition:	