

RIVERSIDE POLICE DEPARTMENT

POLICE DISCOVERY REQUEST PO Box 188 Riverside, NJ 08075

Police Clerk 856-461-8820 Fax: 856-461-6253 mabriola@riversidepolicenj.org Millie Abriola



Payment Information

Requestor Information – Please Print

Maximum Authorization Cost \$ MI _____ Last Name _____ First Name Select Payment Method Date of Birth: Cash Money Order Check Mailing Address Fees: Letter size pages - \$0.05 City _____ State _____ Zip _____ per page Legal size pages - \$0.07 _____ FAX _____ Telephone per page Other materials (CD, DVD, Pick Up On-Site Inspect etc) - actual cost of material Fax _____ E-mail _ Preferred Delivery: US Mail Delivery: Delivery / postage fees additional depending upon If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. delivery type. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States. Extras: Special service charge dependent upon request. Signature Date

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

	Disposition Notes	Tracking Inform	ation Final Cost	Final Cost	
Est. Document Cost	 Custodian: If any part of request cannot be delivered in seven business days,	Tracking #	Total		
Est. Delivery Cost	detail reasons here.	Rec'd Date	Deposit		
		Ready Date	Balance Due		
Est. Extras Cost		Total Pages	Balance Paid		
Total Est. Cost			Records Provided		
Deposit Amount					
Estimated Balance					
Deposit Date	In Progress - Open				
· -	Denied - Closed				
	Filled - Closed				
	Partial - Closed	Custodian S	ignature D	ate	