



REQUEST FOR BODY WORN CAMERA VIDEO

The following information is required for the Navarro County Sheriff's Office to release any body worn camera footage under Texas Occupations Code, Section 1701.661. Provision of this information does not guarantee that such footage will be released as some footage may contain confidential information.

Name of Requestor:	Add	lress:
Telephone:	Email:	
	REQUESTED INFOR	MATION
Date and Approximate Time of Reco	rding:	
Specific Location where recording oc	curred:	
Name of one or more persons who a	re subjects of the recording:	
		othorization from the person who is the subject of b) involves investigation of conduct of a fine only
	FOR SHERIFF'S OFFICE	E USE ONLY
Date Received:	Staff Receiv	ved:
Footage Located:	Current Investigati	on:
Reviewed for Confidential Informati	ion:	
Released:	Fee Paid:	AG Opinion Requested:
Processing Fees:		
DVD(s)x Rate: \$3.00 each		Total \$
Body Cam Recording(s)	_x Rate: \$10.00/recording	Total \$
Body Cam footagex (if not previously released)	Rate: \$1.00 per full minute	Total \$
Received by		Total Due \$