

MPD Body Camera Authorization to Release

By submitting this form, you are attesting that you are a data subject in this body worn camera recording as such is defined in Minnesota Statutes Section 13.825, subd. 4(a). Knowingly providing information that is false in any material respect in order to gain access to not public data is a violation of the Minnesota Government Data Practices act. Penalties for willful violation may apply under Minnesota Statutes 13.09.

DATE & TIME VIDEO WAS RECORDED:	MPD CASE NUMBER:	ADDRESS/ LOCATION OF VIDEO RECORDING:
PRINTED NAME OF <u>SUBJECT</u> INVOLVED IN VIDEO:	SIGNATURE OF <u>SUBJECT</u> INVOLVED IN VIDEO:	
PRINTED NAME OF PERSON REQUESTING VIDEO:		
NAME: _____ (NOT REQUIRED IF REQUESTING PUBLIC VIDEO)		
EMAIL ADDRESS OF PERSON REQUESTING VIDEO: _____ (REQUIRED FOR SENDING LINK TO VIDEO)		
I AM A:		
<input type="checkbox"/> SUBJECT INVOLVED IN THE VIDEO		
<input type="checkbox"/> REPRESENTATIVE OF A SUBJECT INVOLVED IN VIDEO AS AUTHORIZED BY (PRINT NAME): _____		
<input type="checkbox"/> SUBJECT REQUESTING THE RELEASE OF MY IMAGE, MY VOICE AND MY ACTIONS TO BE MADE PUBLIC PER MN Stat. § 13.825		
<input type="checkbox"/> NON-SUBJECT REQUESTING PUBLIC VIDEO OF PEACE OFFICER INVOLVED IN A FIREARM DISCHARGE OR USE OF FORCE RESULTING IN SUBSTANTIAL BODILY HARM PER MN Stat. § 13.825		
<input type="checkbox"/> MEMBER OF A LAW ENFORCEMENT AGENCY, GOVERNMENT ENTITY OR A FEDERAL AGENCY AUTHORIZED TO RECEIVE THIS VIDEO		

To aid in identifying the subject in body camera video, the subject of the video may be asked by an MPD Records Unit employee to provide a physical description of people in the video and/or a description the event captured in the video. You will also be required to provide a photo or copy of the subject's government-issued identification including a color photo for verification. This authorization form and the subject ID must be provided at the time the request is submitted.