

MPD Body Camera Video Request Form

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.

REQUEST DATE: _____

COMPLETED DATE: _____

MPD CASE #: _____
OFFICER(S) NAME(S): _____ BADGE # _____

BODY WORN CAMERA VIDEO WILL BE: **EMAILED** **VIEWED IN LOBBY** **PICKED UP**

DATE VIDEO WAS RECORDED:	ADDRESS/ LOCATION OF VIDEO RECORDING:	
PLEASE CHECK ALL APPROPRIATE BOXES: <input type="checkbox"/> ARREST MADE <input type="checkbox"/> INCIDENT WITHOUT ARREST <input type="checkbox"/> CAR ACCIDENT <input type="checkbox"/> OTHER: _____		
SIGNATURE OF <u>SUBJECT</u> INVOLVED IN VIDEO: _____		
PRINTED NAME OF PERSON REQUESTING VIDEO: NAME: _____ (NOT REQUIRED IF REQUESTING PUBLIC 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		
YOUR ADDRESS: _____		
CONTACT PHONE NUMBER: () _____ - _____	EMAIL: _____ @ _____	STAFF VERIFIED VALID PHOTO IDENTIFICATION: ID TYPE: STAFF INITIALS: _____
TO BE FILLED OUT BY MPD POLICE SUPPORT TECHNICIAN: THE STATUS OF THE REQUESTED VIDEO INVOLVED IN THIS CASE IS INACTIVE/CLOSED AND NOT SUBJECT TO AN APPEAL AS DETERMINED BY: (PLEASE CHECK ALL THAT APPLY) NO VIDEO WAS FOUND TO EXIST (INCLUDE REASON): _____ <input type="checkbox"/> CAPRS <input type="checkbox"/> INVESTIGATOR <input type="checkbox"/> PROSECUTOR <input type="checkbox"/> MNCIS <input type="checkbox"/> APPEALS COURT <input type="checkbox"/> VIDEO ACTIVE / TO AGENCY: _____ TOTAL # OF MINUTES SPENT PROCESSING THIS REQUEST: _____ STAFF INITIALS: _____		
TO BE FILLED OUT BY MPD RECORDS MANAGEMENT SPECIALIST AS ASSIGNED: RMS STAFF INITIALS: _____ TOTAL # OF MINUTES SPENT PROCESSING THIS REQUEST: _____ TOTAL # OF RESPONSIVE VIDEOS FOUND: _____ CCN NUMBERS: _____ REDACTIONS MADE PURSUANT TO MN Stat. § (CHECK ALL THAT APPLY): <input type="checkbox"/> 13.43 <input type="checkbox"/> 13.825 <input type="checkbox"/> Other Stat. § _____		