



Oconee County Sheriff's Office
Open Records Request Worksheet

Requestor Name: _____

Requestor Phone Number: _____

Requestor Address: _____

Requestor Email Address: _____

Types of Records Requested:

Incident Report

Jail Record

Accident Report

Body/Dash Cam Video

CAD Report

9-1-1 Audio

Name of Individual (victim/suspect): _____

Date of Incident: _____

Case Number (if available): _____

Other Information:

Date & Time of Request: _____

Prepared By: _____