Dalton State College Police Department

Open Records Request

Date: Click or tap to enter a date.

Requestor Name: Click or tap here to enter text.

Requestor Address: Click or tap here to enter text.

Requestor Phone: Click or tap here to enter text.

Pursuant to the Georgia Open Records Act (O.C.G.A. § 50-18-70 et seq.), I am requesting the following records:

Describe Records Requested: Click or tap here to enter text.

Name of Victim/ Suspect: Click or tap here to enter text.

Case Number (If Available): Click or tap here to enter text.

Other Information: Click or tap here to enter text.

PLEASE SEND COMPLETED REQUEST TO: [publicsafety@daltonstate.edu](mailto:publicsafety@daltonstate.edu)

2/26/2019