



# Saint Paul Park Police Department



## Discovery Request

Police Case # \_\_\_\_\_

Defendant \_\_\_\_\_

Date & Time of Incident \_\_\_\_\_

### Items Requested

#### Requesting Party:

Name: \_\_\_\_\_

Office: \_\_\_\_\_

Mailing Address:

\_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

- Squad Video (\$25 per disk)
  - Audio Recordings (\$25 per disk)
  - Copies of Surveillance (\$25 per disk)
- Photos:
- Photos (\$25 per disk)
- Or
- Printed Photos (\$10 first photo, \$1 each additional)
  - Other \_\_\_\_\_

- All fees waived under Rule 9.05  
(Public Defender)

Comments: \_\_\_\_\_

**\*\* For Pre-payment amount contact the Saint Paul Park Police Department\*\***

Submit all requests to: Saint Paul Park Police Department

Email: [jdandberg@pd.stpaulpark.org](mailto:jdandberg@pd.stpaulpark.org)

Phone: 651-459-9785

Fax: 651-459-6144

Mail: 600 Portland Avenue

Saint Paul Park MN 55071

### ***For office use only***

Date Received \_\_\_\_\_

Date Completed \_\_\_\_\_

Completed by \_\_\_\_\_

Items not available, requesting party notified

Notes \_\_\_\_\_

\_\_\_\_\_