Canby Police Department

Request for Name Records Check (Canby Only)

performed only for t	he person requesting the b	quest for the Records Check L ackground check in Canby, O ill be mailed or e-mailed to yo	regon, only, and photo
PLEASE PRINT			
Your Name:			
	LAST NAME	FIRST NAME	MI
other Names Used:		NICK NAMES, OTHER NAMES)	
Address:			TATE / ZIP
Prior Addresses:			
Email address:		Phone =	#
Photo Identification by	Clerk: Yes	Type of ID presented:	
	loyee converted to an hour	IE RECORD: Staff time will ly rate. Time charged is in 15	-
•	another person. OSP: htt	olice have processes for requ p://www.oregon.gov/osp/PR	

I authorize disclosure of any records on file concerning myself by the Canby Police Department. I understand the request is for a name records check for the Canby Police Department database only, and a written response by the Department, listing police or citations (if any) in my name.

Signature: _____ Date: _____

FOR DEPARTMENT USE ONLY:	

____ Response provided. Prepared by: _____