



LEGAL DEPARTMENT / ROOM 225
 555 Liberty Street SE
 Salem OR 97301
 Telephone: 503-588-6003
 FAX: 503-361-2202
 TDD: 503-588-6009

Discovery Request Form

Complete the form to the best of your ability. Requests take a minimum of five (5) business days to process.

Current phone number and/or email address is required to process your request. Once the records you requested are available, you will be notified of the total amount due, payable at pickup. The City Attorney's Office accepts cash and checks only for payment of discovery requests.

Discovery Fee:	1-50 pages or photos \$25.00/base rate
Additional fees may include:	51+ pages or photos \$.35/each
	Video/audio recording \$30.00/each

Today's Date:		Next Court Appearance:	
Defendant's Name:			
Email Address:		NOTE: This information will be used to contact you regarding your request.	
Phone Number(s):			
Attorney's Name (if applicable):			
Court Case Number:		NOTE: This information may be found on the citation, release agreement, or Court paperwork you received.	
Citation Number:			
Police Reference Number:			
Specific record(s) being requested:			