

Military Police Report Request

(TODAY'S DATE)

This request is submitted under the Freedom of Information Act, Section 552 of title 5, United States Code.

I request to be provided a copy of a Military Police (MP) report in which I am identified by name, Social Security Number and/or other personal identifier. The following is provided:

Date/Time of Incident (approximate): _____

Place of Incident: _____

Type of Report (e.g. traffic, theft, domestic...) _____

In order to help you determine my status for the purpose of accessing fees, you should know that (must select one):

I am an individual seeking information for personal use and not for a commercial use, or

I am a representative of the following insurance company/law office:

_____ **{Please provide a written consent from your client} This must state that your company is authorized to receive the report.**

I am willing to pay fees for this request up to a maximum of \$____0____. If you estimate that the fees will exceed this limit, please inform me first (**MUST BE FILLED OUT**)

I agree to accept a releasable copy of the requested record(s). I understand that some information or records may be withheld as authorized and cited in Department of Defense Regulation 5400.7, Department of Defense Freedom of Information Act Program, paragraph C3.2.1, Exemptions one through nine.

I understand that upon the MP Office's determination that this is a perfected request, my MP report, this request, and **a scanned copy of my civilian driver's license** (IAW regulation **CACs cannot be copied and accepted**) will be transferred to the FOIA Office who will complete the applicable regulatory redactions and transfer it to me upon completion (see notes on page 2).

Ensure that the information below is legibly printed.

Name: _____

Personal Email Address **ONLY**: _____

Mailing Address: _____

City, State, Zip Code: _____

Personal Telephone Number: _____

Signature: _____

Submit to: usarmy.campbell.id-readiness.mbx.des-ipm-admin@army.mil

Questions about Police Reports call 270-956-1622, 270-956-4370, 270-798-5188, 270-956-2622

PRIVACY ACT STATEMENT

AUTHORITY. 10 U.S.C., section 3013. **PURPOSE.** To provide detailed information necessary for Army officials and commanders to discharge their responsibilities for maintaining discipline, law and order through investigation of complaints and incidents and possible criminal prosecution, civil court action, or regulatory order. **DISCLOSURE.** Voluntary, but failure to provide social security number prevents the Provost Marshal's Office from conducting a thorough record search in order to comply with applicant's request for military police report. **RETRIEVABILITY.** By individual's name, date of birth, SSN, case number. **SAFEGUARDS.** Access to information is controlled; limited to authorized personnel having official need therefore.

Notes:

Complete the form and return it, along with a front and back copy of your civilian driver's license, to the MP Station via email at usarmy.campbell.imcom-atlantic.mbx.des-ipm-admin@army.mil, or hand delivery to 6254 Desert Storm Avenue, Fort Campbell.

Do not worry about the money section, you can place a zero.

Upon completion of MP Station's processing, they will transfer the packet to the installation FOIA office for final processing and release to the requestor via email if an email address is provided, or mail.

IAW law and regulation the FOIA office has 20 calendar days from their date of receipt to release the packet to the requestor. FOIA POC, fortcampbellfoia@army.mil, 2702 Michigan Avenue, Soldier Support Center (Suite 201), Fort Campbell, or phone (270)798-2469.