



COUNTY OF SAN MATEO
OFFICE OF THE SHERIFF

A TRADITION OF SERVICE SINCE 1856

CARLOS G. BOLANOS, SHERIFF
MARK C. ROBBINS, UNDERSHERIFF

CAD Incident # _____

Name of Requester: _____

Address of Incident: _____

Date & Time Frame to be searched: From: _____ To: _____

Please choose delivery:

Please mail CAD Incident to:

Street Address	City	State	Zip
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Please email CAD Incident to: _____

Email copy of signed request with a copy of a valid photo ID to:

sheriffs_recordsrequest@smcgov.org

Or you may mail to:

San Mateo County Sheriff's Office
Attn: Records Supervisor
400 County Center, 3rd Floor
Redwood City, CA 94063

I certify under penalty of perjury that I am familiar with the limited purposes set forth in Penal Code Section 11105 for which the requested information may be used. I further state that the information released hereunder will be used solely for the specific purpose noted above and will not be used to harass, degrade or humiliate any person, nor for employment of related purpose. I further certify as to the need to fulfill official duties and obligations of my office, and hereby agree to indemnify the Sheriff of San Mateo County for any liability arising out of improper use of the information provided.

Signed: _____ Date: _____