OFFICE OF THE SHERIFF
ST. MARY'S COUNTY, MARYLAND
23150 Leonard Hall Drive
Leonardtown, MD 20650

MULTIPLE REPORT REQUEST FORM

1. Fill out form for each request **(Please Print Legibly)**.
2. Complete name and mailing address of requestor. There is no charge to obtain a copy of a report for the victim of the crime. Suspects are not entitled to the report.
3. Insurance companies attach check or money order for **$5.00** for each request.
4. Requests can be submitted in person at Sheriff's Office Headquarters in Leonardtown or can be mailed.
5. Please allow 10 working days for processing your requests. Allow 30 days for special requests and/or open cases.

If you are requesting an ACCIDENT REPORT, refer to SMCSO Form #98A;
Requests for Juvenile Reports are referred to the Office of Juvenile Services.

PLEASE PRINT

DATE/TIME OF REQUEST: _____

INCIDENT TYPE: ☐ Burglary ☐ Theft ☐ Destruction of Property ☐ Stolen Auto ☐ Other (Specify):

_____

VICTIM: _____
Last Name First Middle Date of Birth

DATE/TIME REPORTED TO POLICE: _____ AM or PM

OFFICER'S NAME:_____ I.D. #:_____ CASE #:_____

REQUESTOR NAME: _____
Last Name First Middle Date of Birth

ORGANIZATION, IF APPLICABLE: _____

MAILING ADDRESS: _____

_____
City State Zip

TELEPHONE NUMBER: (____) _____

ADMINISTRATIVE USE ONLY

Date Processed/Mailed/Pick Up/Denied: _____

Records Processing Clerk: _____