



SAINT PAUL POLICE DEPARTMENT
VIDEO MANAGEMENT UNIT

BWC Request for Data From Outside Agency

Name of Agency: _____

Case Number: _____

Name/Title: _____

Address: _____

Phone #: _____

Email: _____

Fax #: _____

Reason for Request (check all that apply):

Criminal Investigation

Criminal Prosecution

Civil

Child Protection

Other

Please explain "other":