



**RELEASE OF VIDEO RECORDINGS FOR LAW ENFORCEMENT PURPOSES PURSUANT TO
G.S. 132-1.4A(h)**

Requester Name and Signature:	
Agency:	CPD Contact:
Agency Email:	Work Phone:
Home Address:	Cell Phone:
Date, Approximate Time, Location of recorded activity requested:	
Supervisors name and contact information:	

Police may only disclose a recording due to the following. Choose which applies:

- ☐ For law enforcement training purposes.
- ☐ Within the custodial law enforcement agency for any administrative, training, or law enforcement purpose.
- ☐ To another law enforcement agency for law enforcement purposes.
- ☐ For suspect identification or apprehension.
- ☐ To locate a missing or abducted person.

Below describe request in detail (use back of page/additional paper if necessary):
