

Kentucky State Police News-Gathering Organization Certification (Type or Print, except signatures)

Name:		
News-Gathering Organization:		
Mailing Address:		
City:	State:	Zip Code:

I hereby certify as evidenced by my signature below, that:

- 1.) I am duly employed and authorized by the above named news-gathering organization to submit a request for accident reports.
- 2.) The news-gathering organization that I represent qualifies as a news-gathering organization as outlined in KRS 189.635(8)(b) and KRS 189.635(8)(d);
- 3.) This request is in compliance with and meets the standards set forth in KRS 189.635; and
- 4.) The above statements are true and correct.

Signature of Applicant

State of County of

Subscribed and sworn to and acknowledged before me this day of , 20\_\_\_\_.

Notary Public, State At Large

My commission expires: