



CHERRY HILL POLICE DEPARTMENT
CENTRAL RECORDS

DEFENDANT DISCOVERY REQUEST

(Please attach a copy of valid driver's license)

CHPD CASE #: _____

Please Print: **Name:** _____

Address: _____

Street

City

State

Zip Code

Phone#: _____

Social Security Number: _____

I, _____, request that a copy of the arrest report on file with the
Cherry Hill Police Department pertaining to my arrest on _____,

be provided to me in accordance with the rules governing Title 3:13-3(a).

Date: _____

Signature: _____