GLENDORA POLICE DEPARTMENT Request for Special Police Services

Date:		
Person or organization requesting service (i	nclude mailing addı	ress for billing statement):
Name:		
(if non-profit, tax exempt number, required)	
Mailing Address:		
City:Phone:	Number o	of Officers Requested
Location where the service will be performed	ed:	
Date:Time: F	rom	_ То
Number in attendance Occasion	on requiring service	;
	Approved	
Applicant	C	hief Rob Castro
For Glendora Police Department U	se Only. Please Do	Not Write below this line.
The cost of special police services for non-p	profit organizations	is: P.D. USE** NUMBER OF
0.00	4404 64 7	PERSONNEL ASSIGNED
Officer (Minimum 3 Hours) Non-Peace Officer (Minimum 3 Hours)	\$104.62/hour \$ 52.35/hour	
You will be billed for these services and one of Glendora.	checks should be m	ade payable to the
*Special arrangements can be made for unusual (626) 914-8273.	lly large gatherings by	y calling Police Administration at
Officer(s) assigned:		
Hours worked: From		Total Hours:
Signed: Officer in Charge		

Form updated: 02/2011 ljt