



Police
Department

SOUTH MILWAUKEE POLICE RECORDS REQUEST FORM



If your report is denied, Section 19.35 (4) (b), Wis. Stats., requires that you be informed that this determination is subject to review under section 19.37(1), Wis. Stats. You may bring an action for mandamus asking for a court to order release of the records or request the District Attorney or Attorney General to bring an action for mandamus asking a court to order release of the records.

TODAY'S DATE _____

YOUR NAME/AGENCY NAME* _____ LAST NAME _____ FIRST NAME _____ MIDDLE INITIAL _____

ADDRESS _____ DATE OF BIRTH _____

CITY _____ STATE _____ ZIP _____

TELEPHONE NUMBER _____

REPORTS REQUESTED
DATE OF REPORT _____ TYPE OF REPORT _____ LOCATION _____ REPORT NUMBER _____

INDIVIDUALS INVOLVED _____

REPORT ONLY COPY OF CITATION CERTIFIED COPY (\$5.00 ADDL) DISPOSITION

RECORD CHECK ON PERSON

NAME _____ LAST NAME _____ FIRST NAME _____ MIDDLE INITIAL _____

ADDRESS _____ DATE OF BIRTH _____

CITY _____ STATE _____ ZIP _____

RECORD CHECK FOR CALLS FOR SERVICE

LOCATION _____

DATES: FROM _____ TO _____

NUMBER OF COPIES REQUESTED _____ @ \$0.25 PER PAGE AMOUNT DUE _____

DO NOT WRITE BELOW THIS AREA _____

REQUEST APPROVED YES NO LETTER AUTHORITY _____

FRONT PAGE _____ COMPLETE REPORT _____ JUVENILES INVOLVED DENIED _____

REPORT STILL UNDER INVESTIGATION _____ COURT ORDER REQUIRED _____

COMMENTS _____