



Request for Release of Police Report

**** Please be advised that you request will be processed immediately and if your request is approved, the requested report will be available to you in two working days. All fees must be paid prior to the release of any report. ****

Date of Request: _____ Number of Copies: _____

Name of Person Making Request: _____

Address: _____

Phone Number: _____ Reason for Request: _____

Signature: _____

.....

I am requesting a copy of the following Police Report.

Date of Report: _____ Report Number: _____

Location of Occurrence: _____

Nature of Report: _____

Reporting Party: _____ Date of Birth: _____

Defendant: _____ Date of Birth: _____

Victim: _____ Date of Birth: _____

.....

THIS SECTION FOR OFFICE USE

Report Released: Yes No Date Released: _____

If report not released state reason why: _____

Fees Paid: Yes No Waived Fee Amount \$: _____

Supervisor's Signature

Date