

## **RACINE COUNTY SHERIFF'S OFFICE**

717 Wisconsin Avenue, Racine, WI 53403-1237 (262) 886-2300 FAX (262) 637-5279 Waterford (262) 534-5166 Burlington (262) 763-9558

Sheriff Christopher Schmaling

Chief Deputy John C. Hanrahan

## ACCIDENT REPORT REQUEST FORM

Prepayment is required before the report will be released. Our Records Bureau will contact you as soon as the materials are ready and prepared for release. To expedite your request, please include as much information about the report as you are able.

DATE OF	REQUEST:			
NAME OF	F SUBJECT IN R	EPORT:Last Name		
		Last Name	First Name	MI
DATE OF	BIRTH:			
REPORT/	COMPLAINT #:			
SPECIFIC	C LOCATION OF	ACCIDENT:		
DATE/TI	ME OF ACCIDE	NT:		
			those additional items below. Y lable. Prepayment for those item	
	Photo(s)	Incident Report	Supplement(s)  Oth	er 🗌
ADDITIO	NAL INFORMA	TION TO IDENTIFY REPO		
, 1	, II 1 III:	. 1	1 .1 . 1 . 1 . 1	1.
ne request is t	unwilling to be identi		cord may not be refused "because the prequest." See Wis. Stats. §19.35(1)(h)	
IAME OF R	REQUESTER:			
HONE NU	MBER:			
MAHAD	DDECC.			

"A Tradition Since 1836"