



NEENAH POLICE DEPARTMENT CITIZEN'S RECORD REQUEST FORM

Please fill out this form if you are requesting a search of Department records. Mail or deliver completed forms to:

Neenah Police Department, Attn: Records
2111 Marathon Avenue, Neenah, WI 54956-4771.

Your record(s) will be available for pickup within five (5) Record Division business days from your request. Records not picked up within seven (7) days will be DESTROYED. Fees for copies ARE DUE UPON RECEIPT. If your request is denied an explanation will be given.

PHOTOCOPY FEES:

8 X 17	Double Sided Accident Report	\$1.00
8 1/2 X 11	Double Sided Accident Report	\$.50
Per Page Charges: (Incident Reports/Additional Pages for Accidents)		
	Incident Report - 1st Page	\$.25
	Additional pages	\$.15 per page
Photograph Reprints (Negatives):		\$.50 per picture
Digital Photo Reprints		\$1.00 per page

Date of Request: _____

Your Name: _____

Address: _____

Telephone No: _____

Record Name to be Searched: _____
(First) (M.I.) (Last)

Date of Birth: _____ **Date of Incident, if known:** _____

Incident Type: _____ **Incident #, if known:** _____

Do you wish a photocopy of all available information? Yes _____ No _____