

RIVER FALLS POLICE DEPARTMENT
Open Record Request for Incidents Handled by the RFPD
Pursuant to §19.35(1)

Telephone: 715/425-0909

Fax: 715/425-0932

UNDER WISCONSIN OPEN RECORDS LAW YOU ARE NOT REQUIRED TO IDENTIFY YOURSELF OR STATE THE PURPOSE FOR YOUR REQUEST IN ORDER TO OBTAIN RECORDS. HOWEVER, PROVIDING THIS INFORMATION ASSISTS IN THE ACCURATE AND TIMELY PROCESSING OF YOUR REQUEST AND ALLOWS US TO CONTACT YOU WHEN THE RECORD IS READY OR FOR APPROPRIATE TRANSMITTAL OF THE RECORD. YOUR REQUEST MAY TAKE UP TO 10 BUSINESS DAYS TO PROCESS.

REQUESTOR (VOLUNTARY) _____ DATE OF REQUEST _____

ADDRESS _____ CITY, STATE & ZIP _____ TELEPHONE _____

I REQUEST RECORD(S) FOR: INSPECTION COPIES PHOTOS CD/DVD DELIVERED VIA: MAIL FAX PICK-UP

PLEASE BE SPECIFIC AS TO THE RECORDS REQUESTED _____

NAME OF INDIVIDUAL/JUVENILE INVOLVED IN REPORT _____

DATE OF BIRTH OF INDIVIDUAL/JUVENILE INVOLVED IN REPORT _____

TYPE OF INCIDENT _____

DATE OF INCIDENT/ACCIDENT _____

LOCATION OF INCIDENT/ACCIDENT _____

- I UNDERSTAND THE PER PAGE FEE FOR COPIES IS 25¢ FOR 8½ X 11 AND 35¢ FOR 11 X 17, PLUS POSTAGE. FAX FEE IS 50¢ PER PAGE.
- PREPAYMENT WILL BE REQUIRED FOR COSTS EXCEEDING \$5. COPYING PHOTOS IS ACTUAL COST OR \$1 IF ON A DISK.
- IF THE REQUESTED COPIES ARE NOT PICKED UP 10 DAYS FROM THE TIME OF NOTIFICATION THAT THE RECORD IS READY, THEY WILL BE DESTROYED.

Please make check payable to: City of River Falls

FOR RECORDS INVOLVING JUVENILES - Check the following, if appropriate. Requester is:

- Juvenile Subject of Report Victim of Report (see reason 3 on back) Legal Custodian of Juvenile
- Legal Guardian of Juvenile Parent of Juvenile Victim's Insurer _____
- Other - (please explain) _____ (company)

Signature of Requestor

•PLEASE NOTE•

•THE INFORMATION ABOVE WILL NEED TO BE VERIFIED PRIOR TO RELEASE OF JUVENILE RECORDS•

Verified by (office use): _____

Office Use Only

REASON CODE _____ RELEASE APPROVED CASE NUMBER _____
 RELEASED IN PART RELEASE DENIED

(SEE BACK OF FORM FOR REASON CODES)

CHIEF OF POLICE/DESIGNEE

A DENIAL OF A WRITTEN REQUEST IS SUBJECT TO REVIEW IN AN ACTION OF MANDAMUS UNDER SECTION 19.37(1) WI STATUTES OR BY APPLICATION TO THE DISTRICT ATTORNEY OR ATTORNEY GENERAL

AMOUNT DUE: _____ RESPONSE DATE: _____ MAILED FAXED COUNTER SERVICE

