Village of Marathon City Police Department

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Marathon City Police Department Request for Information Check One: Purchase a Copy Read Only Name: Address: Telephone Number: Information Requested (Include all pertinent information if known: date, locations, persons involved, associated case numbers): Purpose of Request: Signature of the Requestor: _____ Date & Time: _____ ****************************** Office Use Only Information Released: Approved Denied Reason the Information WAS NOT Released: ☐ Right to a Fair Trial ☐ Release by Permission of Chief Only ☐ Safety of Witness or Complainants ☐ Possible City Liability ☐ Confidential Information ☐ Illegal Purpose ☐ Ongoing Investigation □ Privacy ☐ Investigative Techniques or Protective Procedures ☐ Juvenile Records ☐ Other: _____ Legal Custodian Date