

MOREHEAD POLICE DEPARTMENT

REQUEST FOR RELEASE OF INFORMATION/OR PUBLIC RECORDS

(This form may be filled in and printed. Click on line or box to access fields)

TYPE OF INCIDENT:

Accident
Case report
Complaint
Other

DATE OF INCIDENT: _____ / _____ / _____ (mm/dd/yyyy)

PERSON(S) INVOLVED: _____

COMMENTS: _____

Name: (Please print) _____

Signature: _____ Date: _____

(This form must be signed. It may be mailed, faxed or hand delivered to the Morehead Police Department)