



# Grand Coulee Police Request for Police Report

Person making request: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship with person(s) \_\_\_\_\_  
Involved in incident

Telephone: Home: \_\_\_\_\_  
Cell: \_\_\_\_\_

Police Report Number \_\_\_\_\_

Date of Incident: \_\_\_\_\_

PERSON MAKING REQUEST is:      Suspect ( )      Victim ( )      Defense Attorney ( )

**Charge for Report: First copy to any of the above is free. All others and all subsequent requests are \$10.00 per report.**

Date Record Released: \_\_\_\_\_

Released By: \_\_\_\_\_

Record Number(s) released: \_\_\_\_\_

Personnel Number: \_\_\_\_\_

Received by: \_\_\_\_\_

Receipt Number \_\_\_\_\_