

# WAUSAU POLICE DEPARTMENT

## REQUEST FOR IN-HOUSE RECORDS CHECK

**Please Print**

**Cost \$5.00 per person**

Today's Date: \_\_\_\_\_

Name of Requester: \_\_\_\_\_

Phone number: \_\_\_\_\_

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

Street

City

State

Zip

In-House records checks will be mailed to the address above.

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Information requested for In-House Records Check:

Citations & arrests only

or

List police contacts

\_\_\_\_\_  
First, Middle and Last name

\_\_\_\_\_  
aka's (maiden name, etc)

\_\_\_\_\_  
Date of Birth (Required)

\_\_\_\_\_  
Social Security Number (Optional)

Make payment payable to: City of Wausau  
Mail request & payment to: Wausau Police Department  
515 Grand Avenue  
Wausau, WI 54403

Office use only

Paid \_\_\_\_\_

Date \_\_\_\_\_

Initials \_\_\_\_\_