



Barron County Sheriff's Department

SHERIFF
Chris D. Fitzgerald
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CHIEF DEPUTY
Jason Hagen
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RECORD REQUEST

REQUESTED INFORMATION (Be Specific) – The following is required to process the request:

>Case Number (if known): _____

>Records concerning: _____ / _____
Last Name First MI Maiden/Prior Names

>Date of Birth (for party you are requesting information on): _____ / _____ / _____

>Date of Incident: _____

>Location of Incident: _____

>Type of Report (Check One): Incident Crash Photos OWI
 Body Cam Squad Cam Other: _____

Other Information: _____

REQUESTOR INFORMATION:

Person/Business Making Request: _____
Last Name First Name MI **OR** Organization

Street Address City State Zip Code

Phone: _____ (Day) _____ (Cell)

Email Address: _____

Signature: _____ Date: _____

Barron County Justice Center Room 1200 • www.barroncountyiwi.gov

1420 State Highway 25 North • Barron, Wisconsin 54812-3007

ADMINISTRATION

(715) 537-5814

DISPATCH

(715) 537-3106

JAIL

(715) 537-5559

ADMINISTRATION FAX

(715) 537-6615