

**KENOSHA JOINT SERVICES**  
**REQUEST FOR EVIDENCE/IDENTIFICATION FORM**

**We will not accept any requests without prior authorization from either the District Attorney's Office or City Attorney's Office. See below for numbers.**

Date of Request: \_\_\_\_\_ Case Number: \_\_\_\_\_  
Date of Incident: \_\_\_\_\_ Type of Incident: \_\_\_\_\_  
Location of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_

**Media that is being requested:**

Photographs – 35mm or Digital \_\_\_\_\_ In-car Squad Video: \_\_\_\_\_  
Interviews of Suspect(s) \_\_\_\_\_ Surveillance Video: \_\_\_\_\_

Other (specify): \_\_\_\_\_

\_\_\_\_\_

\* For 911 / Radio Traffic requests, please use the following form:  
“**Communications Audio Request Form**” and submit both forms together.

Person Involved/Defendant's Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Address: \_\_\_\_\_  
Court File number: \_\_\_\_\_

Attorney/Requestor's Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

\*\*\*Please attach or send copy of your DA/City Attorney's Authorization along with this request form.

**State Charges:** Contact the Kenosha County District Attorney's office at: (262) 653-2400  
**Municipal charges:** Contact the City Attorney's Office at (262) 653-4170

Note: State Public Defender's please submit a copy of your SPD form with this request.

**Any questions:** Call Evidence/ID Bureau at (262) 605-5042  
Fax Forms to: (262) 605-7950 or Mail them to: ID Bureau 1000-55th Street Kenosha, WI 53140