



**MARSHAL SERVICE**  
P.O. BOX 948, TAHLEQUAH, OK 74465-0948  
PHONE: (918) 456-9224 FAX: (918) 458-6250



## **RECORDS REQUEST FORM FOR CHEROKEE NATION OR LAW ENFORCEMENT AGENCY**

Date of Request: \_\_\_\_\_

Requester's Name: \_\_\_\_\_

Can we send report digitally? ☐ Yes ☐ No

Requester's Email: \_\_\_\_\_  
(Many records are available electronically; providing an email may allow us to expedite your request)

Requester's Department: \_\_\_\_\_

Requester's Phone Number: \_\_\_\_\_

Reason for request: \_\_\_\_\_  
\_\_\_\_\_

If you do not know the incident number, please provide additional information that will assist us in locating the record(s) requested (for example: Name, Date, Location, etc.)

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

Names on Incident: \_\_\_\_\_

Location of incident: \_\_\_\_\_

Officer Name (if known): \_\_\_\_\_

**Confidentiality Notice:** Any records released are intended for Cherokee Nation official business or for law enforcement purposes only not for public release.

Signature of Requester: \_\_\_\_\_

Office Use Only	
Received By: _____	Date: _____
Information sent via: _____	Date Sent: _____

May take 5 business days to process