

Public Records Request Form

FIRST NAME		MIDDLE		LAST NAME			
ADDRESS			CITY			STATE	ZIP
EMAIL				PHONE			

PLEASE PROVIDE AS SPECIFIC A DESCRIPTION OF THE RECORDS YOU SEEK AS POSSIBLE AND LIST EACH RECORD OR SUBJECT SEPARATELY. YOU MAY USE ADDITIONAL SPACE IF NEEDED)

RECORD(S) DESCRIPTION:

INSPECTION ONLY _____ COPIES REQUESTED (PAID FOR IN ADVANCE) _____

FOR OFFICIAL USE

DATE RECEIVED: _____ RECEIVED BY: _____

COST OF COPIES: \$ _____

DATE(S) OF RESPONSE: _____