PUBLISH RECORDS REQUEST FORM

All public records request will be responded to within ten (10) business days after receipt of request. Responses may indicate further time is necessary, additional information is required, or an estimate of fees required to fulfill the request, as examples.

Pursuant to Public Records Law all exemptions will be redacted from any and all material being released.

Date of Request: ____________________________

Description of Materials Sought: ____________________________

Requestors Information:

Name of Requestor: ____________________________

Firm / Company: ____________________________

Address: ____________________________

City: ____________________________ State: ____________ Zip: ____________

Phone number: ____________________________ Fax number: ____________________________

Email: ____________________________

Please be as specific as possible when requesting information:

☐ COPY OF RECORDS (.05$ per page plus search, redact and/or copy fee)

☐ OTHER / ADDITIONAL INFORMATION: ____________________________

OFFICE USE: Received by: ____________________________ Initial Response: ____________________________ Subsequent Reviews: ____________________________

Fees: ____________________________ Paid: ____________________________ Records Provided: ____________________________

10th Day to Respond by: ____________________________________________