

Open Record Request Form

Date _____

Name _____

Address _____

Phone Number _____

Description of Records (describe with sufficient specificity)

Records will be:

Pick-up _____

Mailed _____

For office use only:

Number of copies _____ Postage _____ Total Cost _____

Date Request Received _____ Date Request Fulfilled _____

Date Mailed _____

Date requester informed available for pick-up _____