



# OPEN RECORDS REQUEST

Printed  
Name of Requestor: \_\_\_\_\_  
(Last Name                      First Name                      Middle Initial)

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alternate Number: \_\_\_\_\_

E-mail (if any): \_\_\_\_\_

Description of Information Requested:  
Provide as much detail as possible INCLUDE DATES if possible:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OFFICE USE ONLY:**

**Date Request Rec'vd:** \_\_\_\_\_ **By whom:** \_\_\_\_\_

**Actions taken:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Documents ready: \_\_\_\_\_ Informed requestor: \_\_\_\_\_

Date & Time requestor picked up documents: \_\_\_\_\_

Signature/Print Items Rec'vd: \_\_\_\_\_