TO BE COMPLETED BY PERSON REQUESTING ACCESS TO OR COPY OF RECORD

DATE OF REQUEST:
DESCRIPTION OF RECORD(S) TO BE INSPECTED AND/OR A COPY OF:
Please note: Under WI State law, a request for access to a public record "is deemed sufficient if it reasonable describes the requested record or the information requested. However, a request for a record without a reasonable limitation as to subject matter or length of time represented by the records does not constitute a sufficient request." [19.35(1)(h), Wis. Stats.]
NAME OF PERSON MAKING REQUEST:
ADDRESS:
PHONE #:
PURPOSE OF REQUEST:
Please note: A request for access to a public record may not be refused "because the person making the request is unwilling to be identified or to the state the purpose of the request." [19.35(l)(i), Wis Stats.] You are being asked to provide the information called for on a voluntary basis.
TO BE COMPLETED BY CUSTODIAN OR DEPUTY CUSTODIAN OF RECORD
DATE & TIME REQUEST RECEIVED:
ACTION TAKEN ON REQUEST [] Approved [] Denied [] Approved in part/Denied in part
Attach copy of any statement denying access to, a copy of, or information contained in any public record covered by this request.
Signature of Custodian approving release:
Fee Due: Paid: YES NO
Date & Time Record released: Released By: