

## 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.

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## 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	NC
Fee Due:	Paid:	YES	N

Date & Time Record released: \_\_\_\_\_ Released By: \_\_\_\_\_