



# Public Information Request Form

Please use the Supplemental Notes Pages to add additional pertinent information that will not fit in the boxes provided.

**A. Completed by requestor.** *If applicable, also attach copy of consent for release of data.*

<b>Requestor Name:</b> (Required if requesting non-public data)	<b>Date of request:</b>
<b>Address:</b> (Optional for notification/mailing purposes)	<b>Phone Number:</b> (Optional, for notification purposes)
<b>Description of the information requested:</b> (attach additional sheets if necessary)	

**B. Signature.** (If form is mailed and includes a request for data that is not public, sign this form and have your signature notarized.)

<b>Signed:</b>
Acknowledged before me this _____ day of _____, 20____.
_____ NOTARY PUBLIC

**C. Completed by Department**

<b>Department Name:</b>	<b>Handled by:</b>
<b>Information classified as:</b> Public                      Non-Public Private                      Protected non-public Confidential	<b>Action:</b> Approved Approved in part (Explain below) Denied (Explain below)
<b>Remarks or basis for denial including statute section:</b>	
<b>Charges:</b> None Photocopy ____ pages X ____ cents = _____ Special rate: _____ (attach explanation) Other: _____ (attach explanation)	<b>Identity verified for Private information:</b> Identification: Driver's License, State ID, etc. Comparison with signature on file Personal knowledge Other: _____
<b>Authorized signature:</b>	<b>Date:</b>

## Supplemental Notes Page

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