



Public Records Request

1. Name of requester: _____ Initials _____
(Print or Type; Initials required for copy requests)
2. Form of identification provided: Photo ID issued by governmental entity including requester's address showing TN citizenship
3. Requester's address: _____
Requester's phone number: _____ Email address: _____
4. Record(s) requested to be inspected/copied:
 - a. Previously inspected on _____(date); inspection waived
 - b. Type of record:
 Minutes Annual Report Annual Financial Statements Budget Other
 - c. Detailed Description of the record(s) including relevant date(s) and subject matter: _____

The remainder of this form is for internal use only.

5. Request submitted to: _____
(Name of Governmental Entity, Office or Agency)
 - a. Employee receiving request: _____
(Print or Type and Initial)
 - b. Date and time request received: _____
 - c. Response: Same Day Other: _____
6. Costs of duplication
 - a. Number of pages to be copied: _____ Estimated
 - b. Cost per page: _____
 - c. Estimate of total cost to produce request: _____
7. Form, Amount, Date of Payment:
 - a. Form of payment: Cash Check Credit Card
 - b. Amount of payment: _____
 - c. Date of payment: _____

Signature of Requester Date _____

Signature of Records Clerk Date _____