

Town of Griffith
Office of the Clerk Treasurer

Request to Review and/or Copy a Public Record

STATEMENT OF REQUESTER: This is a request to review the following public record(s):

(If you need additional space, attach request as an exhibit hereto. The records requested must be described with reasonable particularity.)

Please note that a fee of \$.10 will be charged for each regular copied page and \$.25 will be charged for color copied pages pursuant to IC 5-14-3-8.

_____	_____
Address of requester	Name of requestor (print)
_____	_____
Date signed	Signature of requestor

RESPONSE BY TOWN: The request is APPROVED/DENIED/TURNED OVER TO LEGAL COUNSEL
(Representative to circle the appropriate response. If the request is denied, enter the reason here: _____)

If approved, the approximate date the records will be available: _____
If turned over to legal counsel, the approximate date the requester will receive a response: _____

_____	_____
Date of approval/denial or turned over To legal counsel	Name of Representative (printed)

	Signature of Representative

	Title of Representative

FOR INTERNAL USE ONLY

Received by the Clerk Treasurer on the _____ day of _____, 20____ at _____, ____m.

By: _____

Sent to legal counsel for response? Yes _____ No _____ If yes, date sent _____

Documents Produced or made available? Yes _____ No _____

If yes, documents available on the _____ day of _____, 20____ at _____, ____m.

If no, reason(s): _____