



**THIS INFORMATION TO BE FILLED OUT BY CITY STAFF**

**Requestor's Name:** \_\_\_\_\_

**Request received on:** \_\_\_\_\_ **by:** \_\_\_\_\_

**Request forwarded on this date:** \_\_\_\_\_

**To be handled by:** \_\_\_\_\_

**If the records are open, information or reply is to be provided to the requestor on or before the date:** \_\_\_\_\_

**Attorney General Opinion requested:** \_\_\_\_\_

**Deadline for Attorney General Opinion:** \_\_\_\_\_

**Attorney General Opinion received:** \_\_\_\_\_

**Requestor was contacted by telephone on:** \_\_\_\_\_ **by:** \_\_\_\_\_

**Requestor was contacted by mail on:** \_\_\_\_\_ **by:** \_\_\_\_\_

**Reason for contact:**

\_\_\_\_\_ **To request clarification and or further information regarding the request**

\_\_\_\_\_ **To notify the requestor of estimate of charges (if cost involved is \$40.00 or more)**

**Requestor paid for charges:**    **Yes:** \_\_\_\_\_    **No:** \_\_\_\_\_

**Requestor refused to pay charges:**    **Yes:** \_\_\_\_\_    **No:** \_\_\_\_\_

**Records were picked up on:** \_\_\_\_\_

**By:** \_\_\_\_\_

**Records were never picked up:** \_\_\_\_\_

**Date of final action on the request:** \_\_\_\_\_