



HAMILTON COUNTY BOARD OF COUNTY COMMISSIONERS PUBLIC RECORD REQUEST FORM

Help us to serve you responsibly & respectfully...

Instructions: To help us fill your request, please complete the top portion of this form. The first ten pages are free and all pages thereafter are \$.05 per page (two-sided pages are counted as one page). You may make payment in cash or a check written to "Hamilton County Treasurer."

Information Requested:

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Name:

Company/Organization:

Street Address:

City/ State/ Zip:

Phone #: ()

Fax #: ()

Signature:

Date:

FOR OFFICE USE ONLY

Public Records Released? YES NO

If released, was any information redacted? YES NO

If Yes, list what type of information was redacted and the ORC code granting legal authority for the redaction:

If NOT released, please check the reason below:

- Record is not kept in this office
- Record has met retention period and has been disposed of
- Record is exempt from disclosure per ORC Section: _____
- Record does not exist (or does not exist in format requested)

Was assistance provided to help with the specifics of the request? YES NO

If yes, please explain:

Was a copy of the Policy and/or Retention Schedule given to the Requestor? YES NO

In what format were the records provided? Paper Disk/CD Electronic
By what method of delivery? In-Person U.S. Mail Fax Email

Employee Filing Request:

Date: