

REQUEST FORM FOR ACCESS TO OR COPY OF PUBLIC RECORD.

**TO BE COMPLETED BY PERSON REQUESTING ACCESS TO OR COPY OF RECORD IN
POSSESSION OF THE TOWN OF PLYMOUTH,
ROCK COUNTY, WISCONSIN**

Date and time request submitted to inspect record: _____

Date and time request submitted for copy of record: _____

Name of requester: _____

Mailing address of requester: _____

Telephone number: _____

Is the record or part of the record requested a personnel record of a town employee? Yes ___ No ___

If 'yes', what employee _____

Description of the record(s) to be inspected and/or copied (Please be specific):

Please note: A request "is deemed sufficient if it reasonably describes the requested record or the information requested. However, a request for a record without a reasonable limitation as to subject matter or length of time represented by the records does not constitute a sufficient request." (s. 19.35 (1) (h), Wis. stats.) The request may be made orally, but a request must be in writing before an action to enforce the request is commenced under s. 19.37, Wis. stats.

II. TO BE COMPLETED BY CUSTODIAN OR DEPUTY CUSTODIAN OF RECORD.

Municipal authority receiving request: _____

Date and time request received: _____

Date and time request completed: _____

Was the request acted upon within 10 days of the request? Yes ___ No ___

Action taken on request: () Approved () Approved in part and denied in part () Denied

Please note: For a denial, attach a copy of any statement of the reasons denying access to, a copy of, or other information contained in any public record covered by this request. If the request for the record was in writing, the denial determination is subject to review by mandamus under s. 19.37 (1), Wis. stats., or upon application to the attorney general or a district attorney. (s. 19.34 (4) (b), Wis. stats.)

Amount of any prepayment requested: _____ Amount of any fee to be paid by requester: _____

Reason for the fee: _____

If the requested record was a personnel record, was the town employee notified of the request? Yes ___ No ___*

If a personal record request, the date and name and address of the town employee notified in writing as to the request and response, if any, received from the employee:

Name and title of legal custodian acting on request: _____