



730 1<sup>st</sup> Avenue  
West Point, GA 31833

## Request for Open Records

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
No. Street City State Zip Code

Telephone No.: \_\_\_\_\_  
Daytime Phone No. Evening Phone No.

Company/Organization: \_\_\_\_\_

Do you wish to (check one): \_\_\_\_\_ inspect records \_\_\_\_\_ obtain copies of records  
\_\_\_\_\_ inspect & obtain copies of records

List the specific records you are requesting to inspect/obtain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Approved  
\_\_\_\_\_ Denied  
Reason \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Receiving Records Date

**Notice: Some public records are exempted from disclosure by law. You will be notified within three (3) business days if the records sought is a public record available for inspection, and you will be notified when the record will be available for inspection/and or copying. You will be charged \$.10 for each page of our records you request to have copied, and may be charged an additional fee for certified copies or other copies for which a fee is specifically authorized or otherwise provided by law. In addition, you may also be charged a reasonable fee for search, retrieval, and other direct administrative costs, such administrative charges not to exceed the salary of the lowest paid full-time employee who, in the discretion of the custodian of the records, has the necessary skill and training to perform the request.**