**Section 351.APPENDIX A Request for Public Records**

|  |  |  |
| --- | --- | --- |
| TO: |  | FROM: |
|  |  |  |
| FOI OFFICER |  | NAME |
|  |  |  |
| COMMISSION |  | ADDRESS |
|  |  |  |
| ADDRESS |  |  |
|  |  |  |
|  |  | PHONE NUMBER |

DESCRIPTION OF REQUESTED RECORD(S):

Please indicate if you wish to inspect the above captioned records or wish a copy of them:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | [ ]  | Inspection | [ ]  | Copy | [ ]  | Both |

|  |  |
| --- | --- |
| Do you wish to have copies certified? |  |

|  |  |
| --- | --- |
| FOR OFFICE USE ONLY: |  |
|  |  |  |
| Date Received |  | Date Response Due |

Notations re Oral Communications or Other Items.