

CITY OF COLWICH

**REQUEST FOR PUBLIC RECORDS INFORMATION**

I request copies of the following listed public records information:

Public Record Requested (be specific as to title of record, date of record and other pertinent information needed to identify the document being requested. Use a separate request form for each document being requested.):

---

---

---

---

---

---

---

---

---

---

Date of document being requested:

---

---

Number of copies being requested:

---

---

\_\_\_\_\_  
Signature of Person Requesting Document

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Date of Request