

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:			
Name: Company/Organization:			
Street Address:			
City/ State/ Zip:		Phone #:	
Email:		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? By what method of delivery?	☐ Paper☐ In-Person	□ Disk/CD □ U.S. Mail	☐ Electronic ☐ Fax ☐ Email
Employee Filling Request:			Date: