REQUEST FOR ACCESS TO PUBLIC RECORD

VILLAGE OF WEST MILWAUKEE/ CLERK'S OFFICE 4755 West Beloit Road West Milwaukee, WI 53214 (414) 645-1530 ext. 0

REQUESTER PLEASE NOTE Under Wisconsin law a request for access to a public record "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 record does not constitute a sufficient request." See Section 19.35(1)(h), Wis. Stat. (Please be specific, attach a 2nd page if necessary)

DATE OF THIS REQUEST:			
NAME / ADDRESS OF REQUESTER:		-	
Street:Ci	ty:	State:	Zip
Phone Number	Cell:		
DESCRIPTION OF THE PUBLIC RECORD(S) TO BE INSPECTED AND/OR COPY MADE:			
REQUESTER PLEASE NOTE Under Wisconsin law a request for access to a public record may not be refused "because the person making the request is unwilling to be identified or to state the purpose of the request." See Section 19.35(1)(i), Wis. Stats. You are being asked to provide the information called for below on a voluntary basis. Thank you. PURPOSE OF REQUEST:			

Date and time request received:		very to requester:	
ACTION TAKEN: REQUEST APPROVED IN WHOLE REQUEST APPROVED IN PART * REQUEST DENIED *	Date & Time r	equest complied with	:
	Date & Time r	equest denied:	
NAME AND TITLE OF LEGAL CUSTODIAN(S) ACTING UPON RECORDS REQUEST:	Amount of fee	imposed on requeste	er:
	AMOUNT PA	ID:	
* Attach copy of any written statement of reason for partial compliance or denial by legal custodian.			