**Appendix 10**

**Logan County Treasurers Office**

**Public Records Request Form**

**While not mandatory, if you fill out this form it will help us provide the public records you are requesting in a more timely fashion.**

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| Name of Requestor: | |
| Street Address/Mailing Address: | City, State, Zip: |
| Phone Number(s): | Date Records Request Received: |
| With as much specificity as possible, please describe what records you want to review.  PLEASE PRINT. | |
| The Logan County Treasurers Office provides photocopies of public records at the rate of 5 cents per page. Other fees are noted in the Public Records Policy. **All requests require advance payment.**  There is no charge to inspect records while in the Logan County Treasurers office. Please check your preference below.  You will be contacted as soon as possible to complete your records request.  **\_\_\_\_\_ I would like to inspect these records in the building when they are ready.**  **\_\_\_\_\_ I would like these records copied, and I will pick them up when they are ready.**  **\_\_\_\_\_ I would like these records copied and mailed to me at the address on this form.** | |
| Name of Employee Handling Request: | Date Request Was Completed: |