Village of Mount Horeb 138 East Main Street

Mount Horeb, WI 53572

Phone (608) 437-6884 ext. 104 Fax (608) 437-3190

alyssa.gross@mounthorebwi.info

Public Open Records Request Form

Public records may be requested, inspected and/or copies obtained during normal business hours (Monday through Thursday, 7am to 5:30p, and Friday, 7am to Noon). Please allow seven (7) days for information to the researched. You will be notified when records are available for your inspection or release

| be notified when records are Requestor Information: | c available for your i | inspection of re | .icase | | |
|--|------------------------|-------------------|-----------------------|-----------------|-------------------------------|
| Name | | | | Contact Phone # | |
| | | | | | |
| Address | | City | | State | Zip Code |
| | | | | | |
| Company/Organization Name | | " | Job Title/Affiliation | | |
| | | | | | |
| Fax: | Email: | | | | |
| Document Requested (be specif | fic): | | | | |
| . , , , , , , | , | | | | |
| | | | | | |
| | | | | | |
| Reason for the Request: | | | | | |
| neason for the Request: | | | | | |
| | | | | | |
| Signature: | | | | | |
| Fees: Standard size (8-1/2 x1 | 11) black & white cor | ov \$.25 each: ot | her types of con | ies (actual co | ost) |
| Postage 1 st Class or UPS/Fedi | · | ., +:=== ==== | / - 30 0. 000 | (| , |
| Requests amounting to \$5.00 | | epayment in acc | cordance with W | is. Stats. 19. | 35(3)(f). Records not readily |
| available will be assessed a p | | | | | |
| accumulated. | rocessing reer rine pr | | nan not be payar | | a. |
| Estimated cost for request: | | | | | |
| Copies x \$ | (fee) = \$ | | | | |
| Mailing Cost \$ | | | | | |
| Copiesx \$ Mailing Cost \$x hours to locatex h | nourly rate \$ | = \$ | | | |
| | | | | | |
| | - | • | | - | le for viewing upon request. |
| Certain private informatio | n may be omitted or | redacted for p | rotection of the | parties invo | lved. |
| Any information released | may be subject to er | rors or omissio | n and shall not l | be a binding | liability upon the Village of |
| Mount Horeb. | | | | | |
| | | | | | |
| Office Use Only | | | | | |
| Received by (Initials) Pa | ages | Fee | 2 | | |
| Prepayment Receipt # | | I | | | |
| Amount Prepaid | | Ba | Balance Remaining | | |
| Final Payment | | Re | eceipt # | | |
| | | ''' | · - · · | | |