

PUBLIC RECORDS REQUEST

Please submit this form to Timbra Long, Library Director at the Weiser Public Library. Forms may be submitted in person or emailed to librarydirector@weiserlibrary.org.

Date of Request: _____ Time of Request: _____

Name: _____

Address: _____ Zip Code: _____

Phone: _____ Email: _____

Request format for Information Paper Adobe (pdf) Excel

Description of Public Records Requested:

Requestor's Signature _____ Date _____

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Verbal Response: _____ Documents Copied: _____ Written Report: _____
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Staff Providing Information: _____