

**OPEN RECORDS REQUEST FORM
WHITE TOWNSHIP, INDIANA COUNTY**

DATE OF REQUEST _____

REQUESTER NAME _____

ADDRESS _____

PHONE NUMBER _____

PROVIDE A CLEAR DESCRIPTION OF RECORDS BEING REQUESTED: _____

DISTRIBUTION INSTRUCTIONS: PICK-UP _____ MAIL _____

SIGNATURE OF REQUESTER _____

For Office Use Only:

Copies \$ _____ Postage \$ _____ Specialized Documents \$ _____

"True and Correct" \$ _____ TOTAL COST \$ _____

DATE REQUEST FULFILLED _____

SIGNATURE OF OPEN RECORDS OFFICER _____

DATE INFORMATION: Picked up _____ Mailed _____