

COUNTY OF PORTER, INDIANA

Request For Recordings Pursuant To Indiana Access To Public Records Act

(I.C. 5-14-3-1, et seq., as amended)

I _____, with _____ hereby request

of the County of Porter, Indiana, the right to inspect and copy the following records:

Dated this ____ day of _____, 20__.

The County may provide me with its response to this request by:

- ☐ Telephone at (for informal response) _____
and/or any of the following:
- ☐ By facsimile transmission at _____
- ☐ By mail at _____
- ☐ By email at _____
- ☐ Other _____

Received by: _____ at _____ .m. on _____ 20__.

Signature of receiving employee: _____

Printed Name and Department: _____

Sent to County Attorney for response on: _____ by _____

- ☐ Approved for release
- ☐ NOT approved for release (see attached for reply)