



This form is provided for your convenience. You do not have to utilize this form to request public records and your request does not need to be in writing. If you use this form, you do not have to reveal your identity, provide your name, provide complete contact information or indicate how you intend to use the requested public record(s).

## City of Worthington - Public Records Request

Requestor Information	
Name	
Address	
Phone Number	Fax Number
Email Address	
My preferred contact method is:	
<input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Fax	

Staff Use Only
Request Number
Date Filed
Received by
Date completed
Completed by

Records Requested	
<b>Instructions:</b> Please describe the records you are requesting. The more detail you provide, the easier and faster we can fulfill your request.	
Type of Record	Time Period

Delivery Method	
<b>Instructions:</b> Please indicate below how you would like to receive the records you requests.	
<i>If you would like to receive the records by . . .</i>	<i>We will . . .</i>
<input type="checkbox"/> Pick up from our office	Contact you by your preferred method listed above Please provide us your contact information above
<input type="checkbox"/> Email	Email the records to you Please provide an email address above
<input type="checkbox"/> U.S. Mail	Mail them to you Please provide a postal address above
<input type="checkbox"/> Fax	Fax them to you Please provide a fax number above
<input type="checkbox"/> Inspect them in person at our office	Contact you by your preferred method listed above Please provide us your contact information above