MAYOR
Jude Hehman
CITY ADMINISTRATOR

CITY COUNCIL
Vicki Boerger
Joseph A Hayes
Kim Nachazel
Beth Ruttle Rose
Michael Stoeckle
Dan Rice
Dennis Zahler

City of Fort Mitchell

REQUEST FOR PUBLIC RECORDS

1. _____
   FULL NAME (PLEASE PRINT)

2. _____ _____
   STREET ADDRESS (OPTIONAL) PHONE (OPT.)

3. _____ _____
   CITY (OPTIONAL) STATE (OPT.) ZIP CODE (OPT.)

4. _____
   RECORD(S) REQUESTED

   _____

   _____

5. _____
   APPLICABLE FEE ($.10 PER PAGE OR $2.00 Long Distance FAX)

6. _____ _____
   SIGNATURE DATE OF REQUEST

If additional time is necessary in order to provide the records you have requested, the Office of the City Clerk has 3 working days to respond to your request. If access to the records is denied, the reason is stated below. Appeal for denial can be filed with the Kentucky Attorney General's Office.

_____

_____ _____

City Clerk or Deputy City Clerk Date

Updated 4/7/15