

Optional Standard Public Records Request Form

Township Date Stamp	

MUNSON TOWNSHIP

Please Print Clearly Section 1 – Records Requested I wish to: □ Review □ Obtain Copies Format Requested: □ Paper □ Electronic Section 2 – Requesting Party Information I/We the undersigned, request documents as indicated above and agree to pay Munson Township .10 cents per copied page or \$1.00 per disc at the time of receipt by me or my representative. If copies are mailed, the postage will be charged at rates set by the U.S. Postal Service and must be pre-paid prior to mailing. Name of Individual Making Request: Business Name/Organization: Mailing Address: Phone: _____ Fax: _____ Email: _____ Signature of Person Making Request: Section 3 – Delivery Option Method Requested to Receive: □ Pick-up □ Email □ Standard Mail Do Not Write Below this Line – For Township Use ONLY Date/Action Taken on Request: _____ Amount Due:

Munson Township Hall

12210 Auburn Road • Chardon, Ohio 44024

Phone: 440.286.9255 • Fax: 440-286-1180