



7141 Miami Avenue
Madeira, OH 45243
513-561-7228
www.madeiracity.com

Date Received: _____
Date Fulfilled: _____

CITY OF MADEIRA PUBLIC RECORDS REQUEST FORM

REQUESTOR INFORMATION:

Name (optional):	
Address (required if mailing):	
Email (required if emailing):	
Telephone (optional):	

REQUEST DETAILS:

Format Requested:	<input type="checkbox"/> Paper <input type="checkbox"/> Email <input type="checkbox"/> Other: _____
Delivery Method:	<input type="checkbox"/> Pick-up <input type="checkbox"/> USPS Mail <input type="checkbox"/> Email <input type="checkbox"/> Other: _____
Description of Request:	

COSTS FOR PUBLIC RECORDS - Those seeking public records will be charged only the actual cost of format in which the records have been requested. For example, the digital recording device (i.e. flash drive), making copies and mailing supplies/postage (if applicable). There is no charge for e-mailed documents.