## ◆ ◆ ◆ TOWN OF VERONA ◆ ◆ ◆

## WI S.S. 19.35 – REQUEST FORM FOR ACCESS TO OR COPY OF PUBLIC RECORD

Town of Verona, County of Dane, Wisconsin

Name of Requester:

I. TO BE COMPLETED BY PERSON REQUESTING ACCESS TO OR COPY OF RECORD IN POSSESSION OF THE AUTHORITY OF THE TOWN OF <u>VERONA</u>, <u>DANE COUNTY</u>, <u>WISCONSIN</u>.

Description of the record(s) to be inspected and/or a copy made. Be as specific as possible.

Please note: A request "is deemed sufficient if it reasonably describes the requested record or the information requested. However, a request for a record without a reasonable limitation as to subject matter or length of time represented by the records does not constitute a sufficient request." (19.35(1)(h) WI S.S.

Phone #: \_\_\_\_\_

-			
Address:	City	State	Zip
Email address:			_
SIGNATURE	DATE		
Please note, a request may <u>not</u> be refused "because the person making the request is unwilling to be identified or to state the purpose of the request." (19.35(1)(i) WI S.S.)			
II. TO BE COMPLETED BY CUS	STODIAN OR DEPUT	Y CUSTODIAN	OF RECORD
Date and time request received:	Date and	time request con	npleted:
Action taken on request: ( ) Approved ( ) Appr	roved in part and denied	l in part	( ) Denied
For denial, attach a copy of any stacopy of, or information contained in the record was in writing, then the 19.37(1) WI S.S., or upon application	in any public record codenial determination is	vered by this req subject to review	uest. If the request for w by mandamus under
Amount of any Fee paid by Reques	ster: N/A	– Email Request	
Name of legal custodian or deputy	acting on request: Ter	esa Withee / Cle	rk/Treasurer
(Rev. 08/20)			