



2801 89<sup>th</sup> Street  
 Sturtevant, WI 53177  
 Phone: (262) 886-7201  
 Fax: (262) 886-7205  
 www.sturtevant-wi.gov

**REQUEST FOR RECORDS  
 WISCONSIN OPEN RECORDS LAW**

**REQUEST FOR RECORDS**

**WIS STATE STATUTE 19.35**

**REQUESTOR'S NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**DATE OF REQUEST:** \_\_\_\_\_ **TIME:** \_\_\_\_\_ **AM/PM**

**SPECIFIC RECORD REQUESTED:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If your request for records I denied, you have the right to a review by WRIT OF MANDAMUS or upon application to the District Attorney or the Attorney General.  
 You have ten (10) days to pick up copies of the records requested, once the request is approved. If the records have not been picked up, this request will be filed and a new request must be made with this department.

**FOR DEPARTMENT USE ONLY**

**Complaint/Call #:** \_\_\_\_\_

**In person:** \_\_\_\_\_ **By Mail:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Rec'd by:** \_\_\_\_\_ **Cost:** \_\_\_\_\_

**Request approved - Yes** \_\_\_\_\_ **No** \_\_\_\_\_ **Authorized By:** \_\_\_\_\_

**Reason for denial (if applicable):** \_\_\_\_\_

**Date picked up:** \_\_\_\_\_ **Paid:** \_\_\_\_\_ **Released by:** \_\_\_\_\_