

**ELK TOWNSHIP  
PUBLIC RECORDS REQUEST FORM**

**REQUEST**

Date of Request: \_\_\_\_\_

Via:                    E-mail        U.S. Mail        Fax        In-Person

Name of Requester: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Identify or describe the records sought with sufficient specificity to enable the Township to ascertain which records are being sought:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ACKNOWLEDGEMENT OF TOWNSHIP**

Open Records Officer: \_\_\_\_\_

Date Request Received: \_\_\_\_\_

Township 5-day Response Due: \_\_\_\_\_