## **CITY OF MONMOUTH**

## WRITTEN REQUEST FOR COPYING OF PUBLIC RECORDS

Date of request:	Received by:
Name:	·
Address:	
Phone:	
Describe in detail the public reco	ds you are requesting.
	-
	d to the above request within five (5) business days from th n of five (5) additional days are necessary for reasons
Date responded:	Responded By:
on one of the following:	an extension of five (5) additional days for response based
<ul><li>i. records are stored in a separate location</li><li>ii. volume of records is extensive</li><li>iii. records are dispersed by category</li></ul>	initials

iv. requires more than a routine search

v. will require redacting of personal information

vii. requires consulting another public body

vi. will create an undue burden or interfere with operations