OPEN RECORDS REQUEST FORM

MAIL TO: Department of Youth Services Attention: Legal Division P. 0. Box 66 Mt. Meigs, Alabama 36057

NAME AND TITLE OF PERSON REQUESTING RECORDS:

NAME OF BUSNESS OR ORGANIZATION:

DATE: _____

CONTACT INFORMATION FOR PERSON REQUESTING RECORDS:

BUSINESS PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS:

PHYSICAL ADDRESS OF BUSINESS/ORGANIZATION/PERSON:

FEES: I AM WILLING TO PAY UP TO \$_____ IN PROCESSING FEES WITHOUT PRIOR NOTICE BY THE AGENCY.

PURPOSE FOR WHICH RECORDS ARE REQUESTED:

SEARCH TERMS:

SPECIFIC RECORDS REQUESTED:

<u>Signature</u>

Date