



City of Warren, Ohio Public Records Request Response Form

Date of response: _____ Department producing record: _____

Records custodian completing production: _____

Name of requestor: _____

In response to your records request received on _____, our office is taking the action(s) indicated below:

The public records(s) responsive to your request will be made available for inspection at the following location, date, and time: _____

Copies of public records responsive to your request are:

Attached

Available for pickup at the following location: _____

Being delivered via:

USPS First-Class Mail

Electronically

Other: _____

Your request is denied on the following grounds:

Your request was not sufficiently detailed to enable identification of the specific requested record(s). Additional information is required to identify the requested record(s).

No such record(s) exists or this office does not maintain record(s) responsive to your request.

The following state, federal, or other applicable law prohibits disclosure of the requested records:

It is not practicable for the records you requested to be made promptly available for inspection and/or copying because:

It has not yet been determined that records responsive to your request exist; or

The office is still in the process of retrieving, reviewing, and/or redacting the requested records.

The time reasonably necessary to produce the record(s) or information and/or to make a determination of a proper response to your request is: _____

The estimated cost for copies of the record(s), minus applicable shipping is: \$ _____

If you have additional questions regarding your record request, please contact me at: _____