

Pulaski County Freedom of Information Act Form

Date of Request: _____

Name of Person Making Request: _____

Address: _____

Phone Number: _____

Items requested:

Staff Use Only:

_____ Date of response (must be five (5) working days following citizen request)

_____ Request for seven (7) working day extension (must be requested in writing to citizen & copy attached)

_____ Date and time records review is scheduled with person making request (if requested by citizen or staff)

_____ Date request denied in writing (in whole or part) based on Code Section (Attach copy)

I hereby acknowledge receipt of the aforementioned information:

Name

Date