

Authority: \_\_\_\_\_

Approved

Denied



Time Stamp:

City Clerk's Office, 9229 W Loomis Rd Franklin, WI 53132  
(414) 425-7500

Business Hours: Monday - Friday 8:30am - 5:00pm

**REQUEST TO INSPECT AND/OR RECEIVE PUBLIC RECORDS**

Date of Request: \_\_\_\_\_ Received:  In Person  Email  Mail  Fax

The City Clerk is the custodian of public records, and upon request for any record, shall, as soon as practicable and without delay, fill the request or notify the requestor of denial, in accordance with § 19.35(4). The City will bill based on the below listed schedule. The cost of locating responsive records may be charged if it exceeds \$50.00, and will be calculated as hourly pay rate (including fringe benefits) of the person(s) locating the records, multiplied by the actual time expended to locate the records, per § 19.35(3)(c). A prepayment may be required if total estimated cost exceeds \$5.00, per § 19.35(3)(f).

Name of Person(s) Filing Request: \_\_\_\_\_  
(First) (Middle) (Last)

Mailing Address: \_\_\_\_\_  
(House Number & Street) (Apt/Unit #)  
\_\_\_\_\_  
(City) (State) (Zip Code)

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Other Contact Information: \_\_\_\_\_

Property Address (if applicable): \_\_\_\_\_  
(House Number & Street) (Apt/Unit #)  
\_\_\_\_\_  
(City) (State) (Zip Code)

Subject(s) of Record Request:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How would you like your record(s)?

- Personally Inspect  Provide Copies/Pick-up in Person
- Email (if possible)  Provide Flash Drive/Pick-up in Person

<i>Office Use Only</i>
<u>Routed:</u>
<u>Total Fee Paid:</u>



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**RESOLUTION NO. 2023-8026**

**A RESOLUTION TO AMEND RESOLUTION NO. 93-3956, A RESOLUTION ESTABLISHING DOCUMENT REPRODUCTION CHARGES, TO REMOVE A CHARGE NO LONGER BEING APPLIED AND TO ADD THE COST OF FLASH DRIVES**

<u>Record Type</u>	<u>Charge</u>
Photo Copying	\$ 0.15 per page
	\$ 0.20 per 2-sided page
Oversized	\$1.00 1 <sup>st</sup> sq. ft., \$0.25 each addnl. sq. ft.
Computer Reports	\$4.00 plus \$0.10 per page
Labels	\$4.00 plus \$0.01 per label
Audio Tapes	\$4.00 plus tape cost
Certification	\$4.00 plus photo copy cost
Postage	Cost plus materials _____ @ \$ _____
Flash Drive	\$6.50
Archival Retrieval Rate	Cost plus materials _____ @ \$ _____