



## Information Request Form

The City of University Heights is pleased to make available to the public all information not exempt from disclosure by the General Assembly of the State of Ohio. We will provide you with all non-exempt requested information as soon as possible, usually within 72 hours. To assist us in evaluating your request, please complete this form in its entirety.

Please print:

1. Date of Request: \_\_\_\_\_
2. Name of Person Requesting Information: \_\_\_\_\_
3. Address: \_\_\_\_\_
4. Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_
5. Information Request – state as specifically as possible the information you are requesting:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date of Document (if known): \_\_\_\_\_

\_\_\_\_\_  
Signature

FOR OFFICE USE ONLY	
Material Released:	
Date:	
Employee Name:	
Department Head Approval:	