

PUBLIC RECORDS REQUEST Donald W. Wyatt Detention Facility

UNDER THE ACCESS TO PUBLIC RECORDS ACT

Date:		Request Number:	
Name: (optional)			
Address: (optional)			
Telephone: (optional)			
Requested Records:			
		OFFICE USE ONLY	
Request Taken By:			Request Number:
Date:	Γ	Time:	
Records to be availabl	le on:	Mail:	Pick-up:
Records provided:			
1			
Costs:	copies	search and retrieval	
		ward this document to the Warde	en's Office
			en s omec
CFDFC – Public Reco	ords Request Rec	eipt	
your request, the CFI	DFC determines	ney will be available on that the requested records are exer CFDFC reserves its right to claim s	at the Lobby desk. If, after review of mpt from disclosure for a reason set forth in uch exemption.
			ifying information on this form (name, etc.), uest, records requested, and request number.
Thank vou.			