



**CITY OF MILLS**  
EST. 1921

City of Mills  
704 Fourth Street / PO Box 789  
Mills, WY, 82644  
307-234-6679

## Wyoming Public Records Act Request Form

CONTACT INFORMATION		
NAME:		
COMPANY/ORGANIZATION:		
ADDRESS:		
CITY:	STATE	ZIP CODE:
PHONE NUMBER:	EMAIL ADDRESS:	

REQUEST INFORMATION			
I am Requesting:	<input type="checkbox"/> SPECIFIC DOCUMENT :	<input type="checkbox"/> FILE REVIEW:	<input type="checkbox"/> INSPECT : <input type="checkbox"/> RECEIVE COPIES:
Description of Documents or Files Requested:			
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
Requester Description :	<input type="checkbox"/> NEWS MEDIA: <input type="checkbox"/> EDUCATIONAL: <input type="checkbox"/> PRIVATE CORP.: <input type="checkbox"/> INDIVIDUAL: <input type="checkbox"/> OTHER: _____		

<i>I am not requesting personal information for the purposes of commercial solicitation or in violation of law.</i>	
REQUESTERS SIGNATURE:	DATE:

Office Use Only:		
Staff Contacted:	Date Requested:	Date Completed:
Billing Information:		
Research Time:	Description of Time Spent:	
Services: Scans:# _____ Hard Copies:# _____ CD Duplications:# _____ OTHER: _____		
Delivery Options:	<input type="checkbox"/> Pick Up: <input type="checkbox"/> Mailed <input type="checkbox"/> Emailed <input type="checkbox"/> Other: _____	Total Charges: \$ _____