

Open Records Request Form

Fill out this Open Records Request form below to request public information. This form is intended to be a guide to help clarify and expedite requests. Open records requests are to be made to clerk of the municipality where you are requesting the information.

*Make a copy of the form for your records. Call 608-849-5422 for questions about the form.

Completed form should be faxed or mailed to the Municipal Clerk at 608-849-6412 or PO BOX 168, Dane, WI 53529.

Please input your contact information below. Required fields are marked with an asterisk(*).

*Name _____

*Company/Organization _____ (if applicable)

*Mailing Address _____

*City _____ * State _____ * Zip _____

E-Mail Address _____ (email is the preferred form of communication.)

*Phone Number _____ Fax Number _____

*Please provide information regarding your request:
