## Lorain Port Authority Public Records Request Form

					N	umber:	
It is wi	thin your rights to <b>not</b> :						
	se your identity to the Lost number" which we wil						
Provid	e our office with a writte	n request; and					
Provid	e a reason why you hav	e requested these	e records.				
Howeve sought.	r, if you choose to put y	our request in wri	ting, it would	enhance oui	ability to identify, locate	e, or deliver the records	
To:	Attn: Tom Brown, Exec Lorain Port Authority 319 Black River Lane Lorain, OH 44052 (440) 204-2269	cutive Director		Address: Phone:	<u>Optional</u>		
Reques	t date:	Date red	ceived:				
Record(	s) requested:						
			For Office	Use Only			
	Possible delays: _	Legal Review	_ Redactions	Location	Volume of Request	Payment	
		Other:					
Response date:		Employee:			Medium Used:		

\_\_ Redaction

Check all that apply:

Notes:

\_\_\_ Copy of Response

Exemption