

PUBLIC RECORDS REQUEST



O.R.C. Section 149.43

Date _____

Name _____

Address _____

Primary Phone _____ Email _____

Details of public record requested:

If any clarification is needed, a MetroParks staff member may follow up with additional questions.

Response will be sent within a reasonable period of time.

I request: Paper Copy

Electronic Copy in pdf format via email

(Per page fee may apply.
Pickup at:
2051 Timberman Road
Hamilton, Ohio 45013)

Email address must be provided.