



**LOGANSFORT MUNICIPAL UTILITIES
REQUEST FOR PUBLIC RECORDS**

Request for Records under IC 5-14-3, the Indiana Access to Public Records Act
(Go to: www.in.gov/legislative/ic/code/)

I, _____, hereby request of LOGANSFORT MUNICIPAL UTILITIES (LMU) of Logansport, Indiana, the right to inspect and copy the following Public Records:

Date submitted: _____, 20____.

LMU may provide me with its response to this request, either:

- By e-mail transmission at _____;
- By fax transmission at _____; or
- By U.S. Mail at _____.

For LMU Office:

Received by: _____ at ____:____.m., on _____ 20____.

Receiver's Signature: _____

Printed Name: _____

Sent to Superintendent's Office for response on: _____ by _____.

Received by Mayor's Office on: _____ by _____.