OPEN RECORDS PRODUCTION FORM

INSTRUCTIONS: THIS FORM SHOULD BE COMPLETELY FILLED OUT AND SUBMITTED VIA US MAIL OR OTHER CARRIER TO THE OFFICE OF THE DEPUTY COUNTY MANAGER AT 625 W. 3RD STREET, SUITE 4, JACKSON, GEORGIA 30233 FOR PROCESSING. INCOMPLETE FORMS OR REQUESTS THAT ARE UNCLEAR MAY RESULT IN UNAVOIDABLE DELAYS IN OBTAINING REQUESTED INFORMATION. REQUESTS MADE TO THE WRONG AGENCY WILL BE RETURNED.

RECORDS ARE AVAILABLE ONLY IN THEIR ORIGINAL FORM. THE COUNTY IS NOT REQUIRED TO PRODUCE OR COMPILE RECORDS OR REPORTS THAT ARE NOT IN EXISTENCE AT THE TIME OF THE REQUEST OR TO CREATE A RECORD THAT DOES NOT EXIST. ADDITIONALLY, WE ONLY HANDLE RECORDS UNDER THE DIRECT JURISDICTION OF THE COMMISSIONERS.

NOTE: WE CANNOT TAKE REQUESTS, HOLD, OR PRODUCE RECORDS FOR THE FOLLOWING AGENCIES. YOU MUST MAKE A REQUEST DIRECTLY TO THEIR RECORDS OFFICIAL:

- ⃠ **ANY COURT OR COURT RECORD OF BUTTS COUNTY**
- ⃠ **ANY STATE AGENCY (DFACS, HEALTH DEPARTMENT)**
- ⃠ **SHERIFF'S OFFICE OR JAIL**
- ⃠ **CORONER'S OFFICE**
- ⃠ **BOARD OF ELECTIONS OFFICE**
- ⃠ **BOARD OF TAX ASSESSORS**
- ⃠ **BOARD OF EQUALIZATION**
- ⃠ **TAX COMMISSIONER'S OFFICE**
- ⃠ **CITY GOVERNMENTS, AUTHORITIES, SCHOOL BOARD**

I AM REQUESTING RECORDS FROM THE FOLLOWING AGENCY UNDER THE JURISDICTION OF THE BOARD OF COMMISSIONERS

- □ Butts County Administration Department, Finance & H.R.
- □ Butts County Animal Care and Control
- □ Butts County E-911 Communications Department
- □ Butts County Emergency Management Agency
- □ Butts County Facilities & Maintenance Department
- □ Butts County Fire Department and Ambulance Service
- □ Butts County Parks and Recreation or Senior Center
- □ Butts County Planning and Development Department
- □ Butts County Public Works (Road, Solid Waste, Vehicle)

CHECK ALL FIELDS THAT APPLY

- □ I am requesting copies of requested records
- □ I am requesting materials on electronic media

STATEMENT OF COSTS

I understand that the following charges will be applied to any requests for production of records and I am agreeable to paying these costs.

- ☐ Staff Research Time ($25.00 per hour estimated after 15 minutes)
- ☐ Per page copies ($0.10 per page for standard or legal size)
- ☐ Electronic media (Actual cost of storage device)

PLEASE FILL OUT THE FOLLOWING INFORMATION:

DATE: _____

FROM: _____
Name of person requesting records

EMAIL: _____
Required for electronic response

ADDRESS: _____

C/S/ZIP: _____

PHONE: _____

_____
SIGNATURE OF REQUESTOR

Description of Records being Requested: (Use back if more space is needed)

_____

_____

_____

_____

_____

_____

_____
Signature of County Official Receiving Request

Date Received: _____/_____/_____

_____
Signature of County Official Clearing Request

Date Closed: _____/_____/_____