



**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. 3<sup>RD</sup> 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.**

**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, GDOT)
- ☒ BUTTS COUNTY SHERIFF'S OFFICE, JAIL OR ANIMAL CONTROL
- ☒ BUTTS COUNTY CORONER'S OFFICE
- ☒ BUTTS COUNTY ELECTIONS OFFICE
- ☒ BUTTS COUNTY BOARD OF ASSESSORS
- ☒ BUTTS COUNTY BOARD OF EQUALIZATION
- ☒ BUTTS COUNTY TAX COMMISSIONER'S OFFICE

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

- ☐ Butts County Administration Department (Includes Finance & H.R.)
- ☐ Butts County E-911 Communications Department
- ☐ Butts County Emergency Management Agency (Homeland Security)
- ☐ Butts County Facilities & Maintenance Department
- ☐ Butts County Fire Department and Ambulance Service
- ☐ Butts County Leisure Services Department (Parks and Recreation)
- ☐ Butts County Planning and Development Department (Zoning)
- ☐ Butts County Public Works

**CHECK ALL FIELDS THAT APPLY**

- ☐ I am requesting copies of requested records
- ☐ I am requesting materials on electronic media (tape, disk, flash drive)  
Smaller files may also be emailed, up to 10 MB in size.

**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)

**OPEN RECORDS PRODUCTION FORM**

**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: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_