



Indianapolis Airport Authority

REQUEST FOR PUBLIC RECORDS

Requestor Information (Please print or type)

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

E-mail Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Date of Submission of Request: \_\_\_\_\_

Preferred Method of Delivery\*: E-mail \_\_\_\_\_ US Mail \_\_\_\_\_ Pick Up \_\_\_\_\_

\*Please note that we cannot guarantee your preferred method of delivery.

Record Request Information (Please print or type)

Please be as specific as possible in describing the public records you are requesting. You may attach additional pages, if necessary.

Multiple horizontal lines for describing the record request.

Miscellaneous

Indiana Code § 5-14-3-3(a)(2) permits the Indianapolis Airport Authority to have a written form for submission of requests for public records. You may be required to pay a fee for public records, as authorized by Indiana Code § 51-4-3-8. Please know that this document may itself be disclosed in response to a request for public records.

Please remit form to: Indianapolis Airport Authority Attn: Office of the General Counsel 7800 Col. H. Weir Cook Memorial Drive Indianapolis, IN 46241