

2990 S. Pine Tree Rd.
Hobart, WI 54155

Phone: 920-869-3801
Fax: 920-869-2048

Bobbie Skalecki
Court Clerk

Request for Records

Requestor's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

(no charge for records sent by email)

Records Requested – Please be as specific as possible:

Following to be filled out by records department:

Request Received: Date: _____ Method: _____

Request Approved: Yes _____ No _____ Authority: _____

If denied, reason: _____

Method of Delivery: Paper Copy _____ Email _____ Fax _____

of Pages: _____

Cost @ \$0.50 per page: _____

Date of Delivery: _____ Signature: _____