



# Mansfield Richland County Public Library Public Records Request Form

**Date**

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**Name of Requester**

Only if voluntarily provided: requests can be under a pseudonym or made anonymously.

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**Address**

Optional but required if records are to be mailed.

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**Phone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Description of Records Requested**

**Desired Format**

- ☐ Paper  
☐ Electronic

**Method of Delivery**

- ☐ In Person  
☐ Email  
☐ Standard Mail  
☐ Electronic Media