



Jeffrey T. Gillen
Chief of Police

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PUBLIC RECORDS REQUEST TRACKING SHEET

Date of Initial Request: _____

Name of Requestor (if provided): _____

Address of Requestor (if provided): _____

Requestor contact information (phone, email, etc.): _____

Item requested: _____

Total time to fill request: _____

Date of Response/Filled: _____

What was provided: _____

If denied, what specific exemption: _____

Fee Charged-including breakdown: _____

Petition to Supervisor of Records: _____ Explain w/Dates: _____

Requestor Appeals (Explain w/Dates): _____

Time required to comply w/order of the Supervisor of Records: _____

Final Disposition: _____

Name of Agency Record Keeper Handling Request: _____

Signature of Record Keeper Handling Request: _____

Final Date: _____