

REQUEST FOR INSPECTION OF PUBLIC RECORDS

DATE: _____

TO: _____

FROM: _____

Address

Telephone Number

I would like to inspect and copy the following documents:
(List Records with Reasonable Particularity)

If your agency does not maintain these records, please let me know who does, including the proper custodian name/and address.

I promise to pay \$.50 per page for copying charges. If the copying charges will exceed \$____, please call to discuss. I understand that I may be asked to pay a fee for copies in advance before you make any copies.

Please provide a receipt indicating the copying charges for each document.

Thank you for your prompt attention regarding this matter.

Name of Person Making Request