

**PUBLIC RECORDS ACT REQUEST FORM**

(Government Code Section 6250, et seq.)

1. Requestor's Name:
2. Mailing Address:
3. Telephone Number:
4. Fax Number:
5. Specify type of request:       Inspection     Copies
6. Specify documents requested for inspection and/ or copying – to assist the District in your request, please identify each requested record/ document separately. Please be as focused and specific as possible. Non-specific or unfocused requests may cause a response to be delayed or the request to be denied (*attach additional sheets if needed*).
  
7. The cost to copy requested documents is 25¢ per page, unless the copying is done by an outside service, in which case the cost will be the actual cost of duplication charged by such outside service.

Dated: \_\_\_\_\_

*(Signature of Requesting Party)*

FOR DISTRICT USE ONLY

District Received Stamp