| PUBLIC RECORDS REQUEST FORM | |
|---|--|
| Date: | |
| Your name: | |
| Your Address: | |
| City: | State: Zip: |
| Phone Number: | Email: |
| Dear Ridgemont Public Library | |
| | 149.43 et seq., I am requesting an opportunity to inspect or obtain |
| | sought with enough detail for the public agency to respond. Be as allable records will allow. But it is more important to describe the |
| If there are any fees for searching or c | copying these records, please inform me if the cost will exceed |
| \$ | |
| · · · · · · · · · · · · · · · · · · · | a waiver of all fees in that the disclosure of the requested nd will contribute significantly to the public's understanding of |
| Here, you can identify yourself as a re request is related to news gathering p | epresentative of the news media if applicable and state that your purposes. |
| | this request. If you expect a significant delay in responding to or t me with information about when I might expect copies or the ds. |
| | please cite each specific exemption you feel justifies the refusal to of the appeal procedures available to me under the law. |
| Thank you for considering my request | • |
| Signature: | Date: |