

CITY OF GARNETT, KANSAS

REQUEST FOR INSPECTION OF RECORDS OR FOR COPY

Name: _____ (Requestor)

_____ (Phone Number)

I certify that I do not intend to, and will not: (1) Use any list of names or addresses contained in or derived from the records or information requested for the purpose of selling or offering for sale any property or service to any person listed or to any person who resides at any address listed; or (2) Sell, give, or otherwise make available to any person any list of names or for the purpose of allowing that person to sell or offer for sale any property or services to any person listed or to any person who resides at any address listed.

SIGNATURE: _____

	No. of Copies
1. _____	_____
2. _____	_____
3. _____	_____

CHARGES: A charge for providing access to public records is authorized by State law. Charges are fixed to compensate for the actual costs incurred in honoring your request. See attached copy of Resolution 6/27/00-1 for list of charges.

(TO BE COMPLETED BY RECORD CUSTODIAN)

Date & Time of request: _____
Record Provided: _____

Staff Time Involved: _____ Charge \$ _____
Charge for Copies Made: _____
Total Charges: _____
Amount Due: _____

Record Custodian