

Open Records Request

(K.S.A. 45-220 et seq)

Request for Copies or Access (Please print or type)

I. Requester's Information:

Requester: _____ Company: _____

Address: _____
(Street) (City) (State) (Zip)

Daytime Phone: (____) _____ Fax: (____) _____

E-Mail: _____

II. Requests:

Description of information requested: _____

How will this information be used?: _____

How do you wish to obtain this information? U.S. Mail ___ Priority Mail ___ Fax ___ Pick Up ___

III. Signature – Before signing this document, read this section carefully.

I do hereby certify that I will not: "(A) Use any list of names or addresses contained in or derived from the records or information 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 (B) sell, give or otherwise make available to any person any list of names or addresses contained in or derived from the records or information for the purpose of allowing that person to sell or offer for sale any property or service to any person listed or to any person who resides at any address listed."

(K.S.A. 45-220(c)(2))

Signature: _____ Date: _____