

PUBLIC RECORDS REQUEST FORM

ATTENTION REQUESTOR: To expedite your request for public records, please complete this form with as much detail as possible and specifically identify the type of records you are requesting. Additional pages may be used for records not identified on this form. Requests should reasonably describe identifiable records prepared, owned, used, or retained by the Sacramento County Office of Education (SCOE).

Upon a request for a copy of records, SCOE shall, **within 10 days from receipt of the request**, determine whether the request seeks copies of disclosable public records in the possession of SCOE. Please note that SCOE is not required by law to create a new record or list from an existing record.

If you are requesting the opportunity to inspect records stored at SCOE, it will save time if you notify us in advance so that we can locate documents that are responsive to your request and have them available when you arrive.

REQUESTOR INFORMATION

Name:		Date:
Company/Agency:		
Mailing Address:		
City:	State:	Zip Code:
Phone Number:	Fax Number:	
Email Address:		

DESCRIPTION OF REQUESTED RECORDS

Requested Time Period of Documents – From:	To:

Direct cost of duplication: \$.25 per page for paper copies (first 10 pages free) and \$25.00 per CD for audio copies. Advance payment made payable to SCOE is requested prior to duplication.

- I wish to inspect the requested records, where applicable, at no charge. No copies are to be produced at this time.
- I would like to receive the requested records electronically.
- I would like copies of the requested records. **Documents will not be copied until payment has been received.** I agree to submit payment by check or money order made payable to SCOE upon notification of the page count and direct cost of duplication of the requested records. (Government Code section 6253(b).)

Signature of Requestor