W/J METROPOLITAN DISTRICT

OPEN RECORDS REQUEST

lease indicate the infor	mation you desire	, and/or list each p	ublic record requested	. Please be as specific as p	ossible.
Name:					
Street Address:				Date Stamp Received: Time: a.m/p.m.	
City/State/Zip Code:				By:a.m/p.m	
Phone: Email:					
	· 				
	S 824-72-203(3)(h	\ Ploaso allow a mi	nimum of three husines	ss days to process requests.	
				to produce the records requests.	ested.
FEES APPLICABL	E TO RECORD	S REQUESTS:	ESTIMATE OF TO	OTAL CHARGES:	
• \$0.25/page			@ \$0.25 per j	nage	\$
• \$5.00/page (18x24 & larger)			@ 5.00 per pa	age (18x24 & larger)	\$
• \$30.00/hour after the first hour for research & retrieval			Other charges (at co	(hour (excluding 1 st hour)	\$ \$
 Other charges at cost 				Estimated Total:	\$*
			Total Deposit Due:	(prepayment required)	\$*
**If the deposit e	exceeds actual costs of completed form to	, the difference wil our Custodian of I ontact at: 970.926-0	I be refunded at the tim Records -Marchetti & V 6060 for further inform	e before inspection or relea e of inspection or release oj Veaver, LLC at: debbie@mv ation.	f the records.
CORA Request #	20		FFICE USE		
Request Completed					
-	By		te	Time	
Request Denied: By		ate	Time		
Reason for Denial:					
Requestor Notified B	v•				
2.5questor riotinea D	By	Dat	te	Time	

Notified of extension on:

Estimated Response Date: