



Request for Record Copy

City of Merriam, Kansas

9001 W. 62nd Street, Merriam, KS 66202-2815 913-322-5500

(To be completed by requestor) and MUST be filed with the City Clerk's office.

Today's Date: ____/____/____

Name: _____

(Please Print Your Full Name)

Address: _____

Street #

City and Zip

Office Phone #

Email Address: _____

Cell Phone #

(Please read and sign certification on the reverse side of this form)

Signature of requestor

Copies Sought: Please provide as specific a description as possible of the record(s) you desire to copy. Include record titles and dates, as well as the names of City agencies or departments which produced or hold the record(s):

(To be completed by City of Merriam Record Custodian)

Request for records must be responded no later than the end of the third business day following this request.

CHARGES: A charge for providing copies of public records is authorized by state law and has been established by the City of Merriam's Governing Body. These charges are set at a level to compensate the City for the actual costs incurred in honoring your request. The fee schedule established by the City is available for your review.

The charge to you for copy(s) of the record(s) you request is: \$ _____

Prepayment of the above amount _____ is required _____ is not required

Request Received: Date ____/____/____ Access Provided: Date ____/____/____
Time ____:____ AM / PM Time ____:____ AM / PM

Charge per page copied (\$.25/page): _____ Charge for use of non-office copying equipment: _____

Staff Time Involved: _____ Hours. _____ Minutes @ \$ _____ (per hour charge)

Total charges \$ _____ Prepaid \$ _____ Paid \$ _____ Billed \$ _____

Record Custodian: _____
Print full name Signature Date

*Please read and sign certification on the reverse side of this form
Your copy of this form is your receipt*

CERTIFICATION OF REQUESTER

I, _____, having made a written request for access to and/or copies of _____, _____,

which is/are (a) public record(s) pursuant to the Kansas Open Records Act (KORA), do hereby certify that I do not intend to, and will not:

- use any list of names or addresses contained in or derived from the record(s) 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
- sell, give or otherwise make available to any person any list of names or addresses contained in or derived from the record(s) or information for the purpose of allowing that person to sell or offer to sale any property or service to any person listed or to any person who resides at any address listed.

Signature of Requester

Street Address

City, State Zip Code