Rural Water District #1
Cherokee County

PO Box 622
Fort Gibson OK 74434
Phone 918-400-1043

REQUEST FOR RECORD COPY

(To be completed by Requester – PLEASE PRINT)

NAME:_____

ADDRESS:_____

PHONE NUMBER(S):_____

SIGNATURE:_____

COPIES SOUGHT: Please provide as specific a description as possible of the record(s) you desire to copy.

	Record Title / Date	Number of Copies Desired
1.	_____	_____
2.	_____	_____
3.	_____	_____

CHARGES: A charge for providing copies of public records is authorized by state law and has been established by the District governing body. These charges are set at a level to compensate the District for the actual costs incurred in honoring your request. The fee schedule established by the District is posted in this office.

_____

(To be completed by Record Custodian)

The estimated charge to you for copying the record(s) is: $_____

Prepayment of the above amount is required: YES_____ NO_____

Time of Request
Date:_____ Time:_____

Time Access Provided
Date:_____ Time:_____

Staff Time Involved:_____ Hours _____ Minutes

Charge per page copied: $_____
Charge for use of non-office copying equipment: $_____

Total Charges: $_____ Charges Received:_____
(Date)

_____
Record Custodian

This institution is an equal opportunity provider and employer. TDD / TTY 711