

GRAMA-RECORD REQUEST

Name of Requestor:	Email:	
Business Name:		
Address:		
City:	State:	Zip Code:

Daytime phone number where you can be contacted if necessary:

Please note: State law does not require any agency to create any record to fulfill a request. GRAMA applies only to existing records.

In some cases, you may need to provide a personal identifier to retrieve records.

If you would like to waive the copy cost under UCA 63G-2-203 (4) you will need to submit supporting documentation.

Description of records requested (Be as specific as possible; type of records, subject, year or dates wanted)

Check appropriate request:

I would like to view/inspect the records.

I would like to receive copies of the records. I understand that I will be responsible for copy costs. I authorize costs of up to \$______. I understand that prepayment of copies over \$50.00 may be required and that I will be contacted if estimated costs are greater than the above-specified amount. I would like to receive copies of the records and request a waiver of copy cost under UCA 63G-2-203 (4). Supporting documentation is attached.

If the requested records are <u>not</u> public, please explain why you believe you are entitled to access:

I am the subject of the record. *Rt gugpv'rj qvq'lf gpvllkecvkqp*+ I am the person who submitted the record. *Rt gugpv'rj qvq'lf gpvllkecvkqp*+ I am authorized to access the record by the subject of the record. *Cwcej 'pqvctk'gf 'SEqpugpv'lqt 'Tgrgcug'ql'lfolqt o cvkqp\$'lqt o and present photo identification*0+ Other (please explain):

I am requesting expedited response as permitted by UCA 63G-2-204(3)(b). " *Rngcug" cwcej 'kphqto cvkqp'lij qy kpi 'lacwul'cu'c'o go dgt 'qh'ij g'o gf kc'cpf 'c'lacvgo gpv'ij cv'ij g't geqtf u ctg't gs wht gf 'lqt "c' uaqt { 'lqt "dt qcf ecuv' qt "rwdnkecvkqp." qt "qvj gt "kphqto cvkqp" f go qpuatcvkpi gpvkngo gpv''vq" cp"gzr gf kgf 't gur qpug0+"