

REQUEST FOR INSPECTION OR COPYING OF TULSA CITY COUNCIL PUBLIC RECORDS

Name: _____ Date: _____
Phone Number: _____
Address: _____
Email address: _____

This request is for [] INSPECTION or [] COPYING (check one) of the following described records pursuant to the Oklahoma Open Records Act:

Table with 2 columns: Record Title/Date, Number of Copies. Rows 1-4 with blank lines for input.

RECORD CUSTODIAN SHALL NOTE IN MARGIN ANY RECORD NOT PRODUCED

This request is made for business [] or personal [] need. (Check one)
I have been advised that a charge for copying public records is authorized by state law and has been established by the City of Tulsa.

Signature (Note: you must provide an original signature with your request)

Title or Business Identity (If Applicable)

INTERNAL USE ONLY

Request Date _____ Produced Date: _____
Request Time _____ Produced Time: _____
Delay in Production Yes or No _____ copies made
Reason _____ Charge for non-office equipment
\$ _____
Search Fee Charged Yes or No Search time _____ hours, _____ minutes
Total Charges \$ _____
Charges Paid \$ _____ Receipt Number _____

The following record(s) were not produced for the reason(s) indicated:

Table with 2 columns: Record, Reason. Rows 1-4 with blank lines for input.

Signature of Record Custodian _____