



RECORDS REQUEST FORM

This is a request for records under the Missouri Sunshine Law, Chapter 610.010 to 610.303, and Revised Statutes of Missouri.

I understand that for copies 9 x 14 or smaller, the fee is \$0.10 / per page. If requesting documents to be converted to electronic format, I understand I will be charged a fee for clerical staff time and cost incurred. **NOTE:** Depending on the size and nature of my request for records, I may be charged for research time in accordance with RSMO 610.026.1 and in addition for formats other than paper, I may be charged for the cost of the material used for duplication.

REQUESTED BY:

Name

Address

Phone

Email Address

Signature of Requester

I request that you make available to me the following records:

(Describe the records as specifically as possible. Where you are asking for records that cover on a particular period, such as last year or a specific month, identify that time period.)

INTERNAL USE ONLY

Administrative Assistant

Date Request Received