

# ATCHISON COUNTY KANSAS

## REQUEST FOR ACCESS TO PUBLIC RECORDS

### REQUESTING PARTY'S IDENTIFICATION INFORMATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_ E-mail: \_\_\_\_\_

**NOTICE:** K.S.A. 45-230 prohibits using names and addresses derived from public records for certain commercial purposes. This includes using public records to sell property or services. Persons are also prohibited from obtaining public records with the intention of making the records available to a third party for such purposes. Violation of this law is a civil offense punishable by fine. Violations will be referred to the attorney general or to the county attorney for prosecution.

The undersigned hereby requests access to the records described below and certifies that the undersigned has a right of access to the records. The undersigned further certifies that the information obtained from the records will not be used for a prohibited purpose.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Description of Records Requested: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Format of Records Requested (Printouts, Photocopies, Computer Disks): \_\_\_\_\_

\_\_\_\_\_

Estimated Cost:	Actual Cost:
Research Time to nearest quarter hour:	Research Time:
Pay Level of Clerk's Employee	Pay Level:
Multiplied by Billing Rate of Researcher	
Total Charges for Employee Research	Total Research Charge
Number of Pages at .50	Pages at .50
<b>Total Estimated Cost</b>	<b>Total Actual Cost</b>

