

REQUEST FOR PUBLIC RECORDS

File: KBA-F1

Name _____

Address _____

E-mail address _____

Phone _____

I am a (check one):

- Citizen of the Commonwealth of Virginia
- Member of the Press referenced in Va. Code §2.2-3704
News Organization _____

Identification must be presented prior to inspection of records or receipt of copies. A photocopy of identification is acceptable with a mailed/faxed request.

STAFF USE ONLY

Date Request Received: _____

Request was made (check one)

- by requester on this form
- by telephone
- in writing other than on form
(attach original request)

Date Response Sent: _____
(attach copy)

Identification Verified
Type: _____
Number: _____

Itemized Cost Estimate Attached

I am requesting access to the following records (please be as specific as possible, and attach additional paper if necessary):

Reasonable costs may be assessed in connection with this request. A current schedule of costs appears in Regulation KBA-R. If the costs associated with this request are expected to exceed \$200, the requestor will be asked to pay the estimated costs before the request is processed.

In addition, the requestor may ask for an advance determination of the cost of the request. Please indicate here if you would like an advance determination of cost.
Yes ___ No ___

If you are requesting copies, please specify the format in which you would like to receive them. The Alleghany County school division will provide the record(s) in the requested format if that medium is used by it in the regular course of its business.

Specify format desired (if available):

- Photocopies
- E-mail (give address): _____
- Website posting
- Other (please specify): _____

Signature _____

Date _____

RETURN COMPLETED FORM TO:

Alleghany County Public Schools
Office of the Superintendent
100 Central Circle
Low Moor, Virginia 24457
Phone: (540) 863-1800
Fax: (540) 863-1804