



# OPEN RECORDS REQUEST

PLEASE PRINT OR TYPE

Name: \_\_\_\_\_ Date of Submission: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Once records are gathered, do you desire them to be copied and mailed to you, emailed, or contacted so that you may physically view them? ☐ Mail ☐ Email ☐ View

Description of records requested (Please be as specific as possible. It will save you money on copying costs if records are copied): \_\_\_\_\_

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This request is (choose one) ☐ NOT for a commercial purpose; or ☐ FOR a commercial purpose

**Residency Statement** I further state that I am a resident of Kentucky because I am (please check one):

- ☐ An individual residing in the Commonwealth; or
- ☐ A domestic business entity with a location in the Commonwealth; or
- ☐ A foreign business entity registered with the Kentucky Secretary of State; or
- ☐ An individual that is employed and works at a location within the Commonwealth; or
- ☐ An individual or business entity that owns real property within the Commonwealth; or
- ☐ An individual or business entity authorized to act on behalf of individual listed above; or
- ☐ A news-gathering organization as defined in KRS 189.639(8)(b) 1a to e.

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