

OFFICE OF THE ATTORNEY GENERAL PUBLIC RECORDS REQUEST FORM

Please note that this form is intended for a request for records held by the <u>Office of the Nevada</u> <u>Attorney General</u>. Requests for records of Nevada state agencies must be submitted directly to the records officer for that state agency.

Date of Request				
Requestor Contact Information				
Name:				
Organization:				
Address:				
City, State, Zip:				
Phone:				
E-mail:				

Records Requested:

To complete an estimate, the agency will need the following information:							
I will pick up	Please FedEx Fed Ex billing number:	Please send USPS	E-mail (if format allows)				

Statement I understand there is a charge for copies of public records. I understand I will receive a written estimate for production of the records indicated above if the estimated cost is expected to be over \$25.00, which I will be required to pay in full prior to inspection or reproduction. Materials will be held for 30 days.

Requester	
Signature	Signature

Office Use Only

Request status:		Estimate:	
Date			
	Request received	Estimate:	\$
	Receipt acknowledgement issued	Date deposit received	
	Request filled	Actual (if different):	\$
	Estimated completion	Date final payment received	
	Estimate provided	Completed by	
	Request denied in whole		
	Other:	Retain request form for 90 days following completing of request. RDA 2009047	

Office of the Attorney General 100 North Carson Street – Carson City, Nevada 89701 - Facsimile: 775-684-1108 555 East Washington Avenue – Las Vegas, Nevada 89101 - Facsimile: 702-486-3768 Attention: Shannon Johnson, Public Records Coordinator