

_____ **County Public Library**
_____, Kentucky

REQUEST TO INSPECT PUBLIC RECORDS
RE KRS CH. 61

DATE _____

I request to inspect the following document(s): _____

Number of copies of each document requested @ 10¢ a page: _____

Enclosed \$ _____ Check Money Order Cash

Name

Signature

Address

Phone

•-----•
DISPOSITION

The following disposition was made of the above request:

Signature of Custodian

Date

Amount Received

**COMMONWEALTH OF KENTUCKY
REQUEST TO INSPECT PUBLIC RECORDS
RE: KRS CH. 61**

TO: (Name of library) _____ DATE: _____

Name of person making request: _____

Address (if material is to be mailed): _____

City: _____ State: _____ Zip code: _____

I request inspection of the following document(s): _____

Number of copies of each document requested @ 10¢ a page: _____

Enclosed \$ _____ Check [] Money Order [] Cash []

Is the requested information from a database: Yes [] No []

Is the requested information for commercial use: Yes [] No []

If the answer to the 2 questions above is yes, state the commercial purpose for which the requested information shall be used: _____

I hereby certify that the information set forth in the above statement is true and correct to the best of my knowledge.

Signature: _____

(Library staff) The following disposition was made of the above request: _____

Amount Received: _____

Date: _____

Signature of Custodian: _____

Date: _____