



Pecan Valley RWD

12 Winding Creek Rd
Lawton, OK 73505

Phone 580-510-0306
After Hours/Emergency 580-730-3644
Fax 580-713-4385

pecanvalleyrwd@gmail.com
pecanvalleyrwd.com

REQUEST FOR RECORD COPY

(To be completed by Requester – PLEASE PRINT)

NAME: _____

ADDRESS: _____

PHONE NUMBER(S): _____

SIGNATURE: _____

COPIES SOUGHT: Please provide as specific a description as possible of the record(s) you desire to copy.

	<u>Record Title / Date</u>	<u>Number of Copies Desired</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____

CHARGES: A charge for providing copies of public records is authorized by state law and has been established by the District governing body. These charges are set at a level to compensate the District for the actual costs incurred in honoring your request. The fee schedule established by the District is posted in this office.

(Below to be completed by Record Custodian)

The estimated charge to you for copying the record(s) is: \$ _____

Prepayment of the above amount is required: YES _____ NO _____

Time of Request

Date: _____ Time: _____

Time Access Provided

Date: _____ Time: _____

Staff Time Involved: _____ Hours _____ Minutes

Charge per page copied: \$ _____ Total Charges: \$ _____ Charges Received: _____

Record Custodian

Date