**KDB-E**©

**EXHIBIT** 

## PUBLIC'S RIGHT TO KNOW / FREEDOM OF INFORMATION

## REQUEST FOR PUBLIC RECORDS OF THE SCHOOL DISTRICT

**Note**: It is not required by law that this form be filled out by a person requesting public records. The District may request the document be filled out or the District may use the document internally as documentation of public records requests.

Name		Date		
Address(street)	(city)	(state)	(zip)	
Phone: Home		ork		
E-mail address				
Nature of request:				
<ul> <li>Opportunity to review custodian's office)</li> </ul>	v records (no origina	l record may leave	the	
□ Copies of records.  Please read and sign the following statement:				
(Date)	(Date) (Signature)			
Notice: A fee will be charge	ed for copying based	upon actual cost fo	or providing the infor	mation.
Records requested (please	be as explicit as pos	ssible as to the rec	ords you desire):	