KENTUCKY LEAGUE OF CITIES
OPEN RECORDS REQUEST FORM

Name of Requestor:_________________________________ __________________________________

Mailing address:  ________________________________________________________________________

Phone number:  __________________________  Fax number: ______________________________________

SPECIFIC RECORD(S) REQUESTED (Indicate whether you are requesting copies or to review the
records. If this is not indicated, it will be assumed you are reviewing copies. If you reside within Fayette
County you may be required to review copies before copies will be made)

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Cost of copies and any postage must be paid in advance of receiving the copies. Copies will be made at
the cost of .10 per page.

Select one:  This must be completed.
Request is for □ noncommercial OR □ commercial purpose.

I hereby certify the information provided in this request is true and accurate.

_________________________________ _________________ _____________________
Signature      Printed Name

A PERSON WHO VIOLATES KRS 61.874 (INDICATING WHETHER RECORDS ARE
REQUESTED FOR COMMERCIAL OR NONCOMMERCIAL PURPOSE) SHALL BE LIABLE
TO KLC FOR DAMAGES, COSTS, AND PENALTIES TO THE AMOUNT ESTABLISHED BY

LAW

Return completed application to:
Kentucky League of Cities
100 East Vine Street, Ste. 800
Lexington, Kentucky 40507
Fax:  (859) 977-3703

FOR KLC USE ONLY

Date received: _____________________ By: _____________________
Latest date to respond: ______________ Date responded: ______________
Disposition:  _____________________________________ _____________________

Fees Charged:
Photocopies  __________________
Media  __________________
Postage  __________________
Staff*  __________________    *Only for commercial requests
Other  __________________
TOTAL  __________________