Clark County School District No. 161

COMMUNITY RELATIONS **4260F**

District Record Request Form

Request for Public Records

I request: ☐ to examine ☐ to copy ☐ to receive an electronic copy of the following records:

_____

_____

_____

_____

_____
Name (Please Print)

Mailing Address:

_____

_____

_____
Date of Request

_____
Daytime Phone Number

Received By:

_____ Date

Received: _____

Public Agency _____

_____ Initial if Applicable: More than three (3) working days are needed to locate or retrieve the requested records. A response shall be provided within ten (10) working days of the request.

Payment received for_____copies _____
Amount Received

Payment received for_____labor _____
Amount Received

_____
Receipt Number