REQUEST TO INSPECT PUBLIC RECORDS FORM OPEN RECORDS REQUEST (KRS CHAPTER 61)

REQUESTOR'S INFORMATION:	Today's Date:
Printed Name	Company Name
Mailing Address, City/State amd ZIP code	
Phone Number	Fax Number
Email	
I request to inspect document(s) pertaining (Name of Party/Cabinet Agency/or description of document to this form).	g to the following: tts. If more room is needed, please use a separate sheet of paper and attach it
use of any part of a public record or records, in any use by which the user expects a profit either through not include the publication or related use of the public	S 61.870(4) defines "commercial purpose" as "the direct or indirect form, for sale, resale, solicitation, rent, or lease of a service, or any commission, salary, or fee." However, "commercial purpose" does record by a newspaper or periodical, by a radio or television station exprosecution or defense of litigation by the parties to such an action
This request is (choose one): NOT for a commercial FOR a commercial	
I hereby certify the information provided in t	his request to be true and accurate.
Requestor's Signature	Print name and date
SEND REQUEST TO: Records Custodian Kentucky Artisan Center of Berea 500 Mero Street, 5th Floor Frankfort, Kentucky 46001 Fax: (502) 564-1079 Email: kacb.openrecordsrequest@ky.gov	Choose your preferred method of receiving documents (choose only one): ☐ Electronic (email) if responsive material is less than 5MB (free). If the material is more than 5MB, the cost is \$7.00 per flash drive. ☐ Paper Copies (.10¢ fee per page) ☐ Inspect documents onsite (free) *Preference is not guaranteed and will be determined based upon the original format

of the documents.