



1391 Engineer Street • Vista, CA 92081-8840
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PUBLIC RECORDS REQUEST FORM

Date: _____

I, _____, representing _____
 (Name) (Firm, Company, etc.)

request certain public records pursuant to the California Public Records Act (Sec. 6250 et seq. of the Government Code):

TITLE/DOCUMENT	NUMBER/DESCRIPTION	DATE/ PERIOD	PAGES	TOTAL COPIES

I understand that there may be a charge for reproduction of all materials that I request. I agree to pay the direct costs of duplication, in accordance with sections 1.11.6, Copies Requested Pursuant to the Political Reform Act of 1974, and 1.11.7, District Copy Costs, the District's Public Records Policy.

 (Signature) Name: _____
 (Type or Print)
 Title: _____ Firm: _____
 Mailing Address: _____
 City, State & Zip: _____
 Phone Number: _____

The District reserves the right to delete any portion of the material requested that is exempt by applicable provisions of law, but shall provide the remainder of the information as requested.

<i>For District Use Only</i>	
<i>Request processed by:</i> _____	<i>Compliance Date:</i> _____
<i>Other Action:</i> _____	