

NOTICE OF INTENTION TO EXAMINE PUBLIC RECORDS

Please Take Notice that on the day specified (during your regular business hours, and subject to the rules of your agency) I intend to examine with the privilege of copying, the particular records specified below.

Date to be examined _____

Records Sought:

Signature of Applicant _____

Date

For Agency Use Only

___ Approved ___ Disapproved

Signature: _____

Title _____

Date: _____