SAN JUAN COUNTY SHERIFF'S OFFICE RECORDS REQUEST FORM

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	Luco	ald like to inspect (view) the records.	
	I would like to receive a copy of the records. I understand that I may be responsible for fees associated wit copying charges or research charges as permitted by UCA 63-2-203. I authorize costs of up to \$		
	UCA 63-2-203 (3) encourages agencies to fulfill a records request without charge. Based on UCA 63-2-203 (3). I am requesting a waiver of copy costs because:		
		releasing the record primarily benefits the public rather than a person. Please explain:	
		I am the subject of the record.	
		I am the authorized representative of the subject of the record.	
		My legal rights are directly affected by the record and I am impoverished. (Please attach information supporting your request for a waiver of the fees.)	
If the 1	requested	records are not public, please explain why you believe you are entitled to access.	
		I am the subject of the record.	
		I am the person who provided the information.	
		I am authorized to have access by the subject of the record or by the person who submitted the information. Documentation required by UCA 63-2-202, is attached.	
		Other. Please explain:	
	I am requesting expedited response as permitted by UCA 63-2-204 (3)(b). (Please attach information that sho your status as a member of the media and a statement that the records are required for a story for broadcast or publication; or other information that demonstrates that you are entitled to expedited response.)		
Reque	ester's]	Name:	
Mailir	ıg Add	ress:	
Daytin	ne tele <u>r</u>	phone number: Date:	
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	FOR AGENCY USE ONLY
Request Received:	Person Receiving Requests
(Date)	Person Receiving Request:(Officer Name)
How is the record series Classified	1?
Public (UCA 63-2-2) Private (UCA 63-2-2) Controlled (UCA 63-2-2) Protected (UCA 63-2-2) Exempt or governed	-302) 3-2-303)
If records are not public, how was	
RESPONSE DATES:	
Request Approved:	Records Sent:
Request Denied:	Denial Sent:
Response made by:	
•	(Officer Name)
Notified requestor that the records v	which were requested are not maintained by this agency
(Date)	
Extraordinary circumstances extensi	ion time:
Notification Sent:	
**********	*****************
	FEE SCHEDULE
Report (Simple) - \$5.00	
Pictures - \$1.50 each	**************************************
CD/Videotape - \$25.00	·
Photo Copies\$0.25 per page	
Records Hourly - \$25.00 per hour	

Electronic Transmittal - \$5.00

Postage