

# OPEN RECORDS REQUEST



Date: \_\_\_\_\_

To: City of Oakwood  
City Clerk  
P.O. Box 99  
Oakwood, GA 30566

My contact information is as follows:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I'm requesting the following public records:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pursuant to Georgia's Open Records Act:

§50-18-71 (c)(2) I agree to pay any copying and/or administrative costs that are incurred in fulfilling my request to the extent permitted by Georgia Law. Such costs may include copying charges of \$.10 per page for letter or legal-size documents, the actual costs of producing odd-size printed documents, actual media costs on which electronic records or data is produced, administrative charges for the search/retrieval, and other direct administrative cost.

§50-18-71 (c)(1) Such administrative charges are not to exceed the salary of the lowest paid, full-time employee who, in the discretion of the custodian of the records, has the necessary skills and training to fulfill the request; provided, however, that no charge shall be made for the first quarter hour. Charges can occur for records—even if not picked up §50-18-71 (c)(3).

I am prepared to pay reasonable search, retrieval and copying fees associated with my request.

\_\_\_\_\_  
**Signature**