

**REQUEST FOR COPYING
OF CITY PUBLIC RECORDS**

_____ Date _____
Name of City Department

Name _____ Telephone No. _____

Address _____

Copies of the following described records are requested pursuant to the Oklahoma Open Records Act:

Record Title/Date	Number of Copies _____
1. _____	
2. _____	
3. _____	
4. _____	

RECORD CUSTODIAN SHALL NOTE IN MARGIN ANY RECORD NOT PRODUCED

This request is made for a **business** or **personal** need. (Circle One) I have been advised that a charge for **copying** public records is authorized by state law and has been established by the City of Tulsa.

Signature

Title or Business identity (IF APPLICABLE)

INTERNAL USE ONLY

Request Date _____
Request Time _____

Search Fee Charged **YES or NO**

Search time _____
 hours minutes

Total charges \$ _____

Charges Paid \$ _____

Receipt Number _____

Signature of Record Custodian _____

Record/Copy Produced:
Date _____
Time _____
Charge for non-office copy
equipment \$ _____
_____ Copies made

Delay in Production **YES or NO**

Reason _____
