

## **Request for Public Records**

It's our policy to make all public records available for public inspection at reasonable times in accordance with the Colorado Open Records Act (§24-72-203 C.R.S.). Please complete this form and mail it to Clearview Library District 1194 W. Ash St., Windsor, CO or email it to director@clearviewlibrary.org.

Date of Request	Paper Copies Requested	Digital Copies Requested
	Fees may apply. A cost estimate will be provided after the	
	request has been evaluated.	•
<u>Please Print</u>		
Name (First, Last)		
Company (if applicable)		
Address		
City	State	ZIP
Phone	Email	
Please describe the specific documents you are requesting:		
Pursuant to the Colorado Open R	ecords Act (§24-72-203 C.R.S.), thre	e (3) workina davs mav be
•	ds. This may be extended by seven (	
circumstances. See our Open Rec	ords Policy for further information a	at clearviewlibrary.org.
OFFICIAL USE ONLY		
Date Received	Data Completed	Time Completed for Request
Date Received	Date Completed	Time completed for Request
Employee Name		
Employee Signature		Date
Limployee digitature		Date