City of Mission, Kansas
Request for Inspection/Copy of Open Records

Name:  
Please print

Address:  
Street__________________________City and State__________________________

Telephone: ________________________Email: ________________________________
Please include area code

Record Sought: Please provide a specific description of the record(s) you desire to inspect/copy. Please include record titles, dates, and the names of city agencies or departments which produce or hold the record(s).

Please Note: Most records will be produced within three business days. If request is delayed or denied, an explanation will be provided.

I certify that I do not intend to, and will not: (a) use any list of names or addresses contained in or derived from the records or information requested for the purpose of selling or offering for sale any property or service to any person listed or to any person who resides at any address listed; or (b) sell, give, or otherwise make available to any person any list of names or addresses contained in or derived from the records or information for the purpose of allowing that person to sell or offer for sale any property or service to any person listed or to any person who resides at any address listed. See K.S.A. 45-220 (c) (2).

Signature:

PLEASE DO NOT WRITE BELOW THIS LINE

Charges: A charge for providing access of public records is authorized by State law and has been established by the City Governing Body. These charges are set at a level to compensate the City for the actual costs incurred in honoring your request. NOTE: Prepayment of estimated cost may be required.

Estimated Prepayment of $______________  _____ required  _____ not required

Number of Copies: _______________ X  $.25/page  $______________

Staff Time: _______________ Hours X  $40.00/hour  $______________

Less Prepayment:  $______________

TOTAL CHARGE FOR ACCESSING THE RECORD:  $______________

Request Received: ________________ (date)  ______________ Initials

Records Provided: ________________ (date)  ______________ Initials