



REQUEST FOR OPEN PUBLIC RECORDS
CITY OF OTTAWA, KANSAS
101 S. Hickory Street, Ottawa, KS 66067
Phone: 785-229-3600
CityClek@ottawaks.gov / www.ottawaks.gov

Pursuant to Kansas Open Records Act K.S.A. 45-218 & K.S.A.45-220

REQUESTER'S NAME: _____

REQUESTER'S PHONE #: _____

REQUESTER'S EMAIL: _____

REQUESTER'S MAILING ADDRESS: _____

RECORDS SOUGHT: Please provide as specific a description as possible of the record(s) you desire to obtain. Include record titles and dates, if possible, as well as the names of city agencies or departments that produced or hold the record(s). Attach additional pages if more space is needed.

City Personnel will respond to your request within 3 business days from the time of receipt. Responses may consist of a completed request (if no costs are incurred), a request for clarifying information to aid in the completion of the request, a timeline for completion and/or itemized invoice for payment, or a reason that the request cannot be fulfilled as requested.

"No person shall knowingly sell, give or receive, for the purpose of selling or offering for sale any property or service to person listed therein, any list of names and addresses contained in or derived from public records..."K.S.A. 45-230. By signing below, I attest I will not use the records requested in violation of K.S.A.45-230. I also acknowledge that, pursuant to K.S.A. 45-230(6)(b), a violation of this section can subject the violator to a civil penalty of up to \$500.00 per violation.

Signature: _____ Date: _____

Office Use Only:

Total Charges (Attach Itemized Invoice): _____ Date Paid: _____

Method of Record Delivery: ☐ In-Person ☐ Mailed ☐ Faxed ☐ Emailed

Request Fulfilled by: _____ Date: _____ Time Provided: _____

Freedom of Information Officer's Signature: _____