Public Record Request Form

Contact Information

Name: __________________________ Date: ______________

Mailing Address: __________________________________________

City: ______________________ State: ______ Zip: ____________

Phone Number: ______________________ Fax: ______________

Email Address: _________________________________________

Public Record(s) Requested

Please check one of the following:  Total Number of Pages/Sections: ______ # faxed pages ______ Postage ______

☐ I want to view the public record(s) at Yavapai College (YC) at no cost.

☐ I want to purchase copies of the public record(s). Fees may vary based upon the format in which it is readily maintained.

☐ Paper Copy - $0.25/per page  ☐ Digital Copy - $0.25/per page  ☐ Fax Transmittals - $1.00/per page

☐ Postage - Actual Costs

☐ USB Flash Drive $15.00 (If records are not readily maintained in an electronic format, then both a per page and USB charge shall apply.)

Copied documents may be picked up or mailed upon receipt of payment. Mailed documents are subject to postage fees. Requests for special reports or for commercial use will be assessed an appropriate value.

Indicate whether you are using the public record for a commercial or non-commercial purpose. ☐ Client Representation

☐ Commercial*  ☐ Media  ☐ Personal

Commercial Purpose

*ARS §39-121.03D—Commercial purpose includes any use of a public record for the purpose of sale or resale or for the purpose of producing a document containing all or part of the copy, printout or photograph for sale or the obtaining of names and addresses from public records to another for the purpose of solicitation or for any purpose where the purchaser can reasonably anticipate the receipt of monetary gain from direct or indirect use of the record. When a person requests copies of public records for commercial purposes, a statement setting forth the commercial purpose for which the copies will be used must be provided.

Commercial Purpose Statement

Notary verification is required only for commercial purposes.

Sworn (or affirmed) to before me this _____ day of ________________ 20____.

________________________________________ My commission expires: __________

Notary’s Signature

Payment—Make checks payable to Yavapai College. Information release is subject to check clearance.

Total $________

Method of Payment: ☐ Check  Check Number: ____________ ☐ Cash  ☐ Credit Card  ☐ No Fee

For YC Use Only ☐ Approved ☐ Not Approved Paid $ ________ Paid Date ____________

Please Note: YC requires that a reasonable amount of time be allowed for responding to any request to copy or inspect records. YC may require additional time to process more difficult requests and if so, an estimated time frame will be provided to the requestor.