## REQUEST FOR RECORD COPY CITY OF HARPER

(TO BE COMPLETED BY REQUESTER)

NAME:					(Printed	I)		
ADDRESS:		(Street)						
					(City, State)			
SIGNATURE:								
COPIES SOUGHT: Please pro- Include record titles and dates or hold the record(s): Record 1	, as well a			encies or depart	(8) £ (8)	oroduced	ору.	
1					=== =			
2								
3								
4				-				
-				_				
(TO DE COMPLETED BY DE	20000 0	10705144						
(TO BE COMPLETED BY RE	JORDS CO	JS I ODIAN	)					
Charges: A charge for providir by the city governing body. Thincurred in honoring your requ	ese charge est. The fe	es are set a e schedule	t a level to establishe	compensate the d by the city is p	e city for the according this o	ctual costs	lished	
The charge to you for copy(s	s) of the re	ecord(s) yo	u request	is: <u>\$</u>	¥ .	_		
Prepayment of the above amo	unt:		is require	d	is NOT i	required		
Date and time of request:	Date			Access provide	d: Date			
	Time		am/pm		Time	100	am/pm	
Staff time involved: Hours		_Minutes	<u> </u>	÷				
Charge per page co		Charge for use of non-office copying equipment:						
omange per page co	\$	•	<b>-</b> :	\$		— —		
Total Charges:								
Prepaid \$								
Paid \$		-						
	•	-						
Billed \$	•	<del></del> 0		Peco	orde Custodian	1		

YOUR COPY OF THIS FORM IS YOUR RECEIPT