



1100 Richardson Court  
Cheyenne, WY. 82001  
307-241-6084

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## Public Record Request

\_\_\_\_\_  
Name of person requesting records

\_\_\_\_\_  
Phone #

Email Address: \_\_\_\_\_

Under the Wyoming Public Records Act (16-4-201 et seq.), I am requesting an opportunity to inspect or obtain copies of public records as described below:

**Description of Record(s) Sought**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ I would like to inspect records.

\_\_\_\_\_ I would like to receive copies of the record. I understand that I am responsible for the costs to provide the records and authorize costs up to \$ \_\_\_\_\_. I further understand that I will be contacted if the estimated costs are greater than the amount I have specified, and that the school will not respond to a request that I have not authorized adequate costs.

Copies of the information requested will be provided as soon as reasonably possible. I recognize this records request form is a public document.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**