

**REQUEST FOR PUBLIC RECORDS**

File R-2-2.1a

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

I am making this request as a (check one):

\_\_\_\_ Citizen of the Commonwealth of VA

\_\_\_\_ Member of the Press

\_\_\_\_ News Organization \_\_\_\_\_

**OFFICIAL PHOTO ID MUST BE  
PRESENTED PRIOR TO INSPECTION OF  
RECORDS OR RECEIPT OF COPIES.  
(Legible photocopy acceptable with faxed  
or mailed requests.)**

<u>STAFF USE ONLY</u>	
Date Request Received:	_____
Request Made (check one)	
On this form	
By telephone	
_____ In writing other than on this form	(attach original request)
_____ In Person	
_____ Other	_____
Date Response Sent:	_____
Identification Verified:	_____ Type: _____
Number:	_____
Date Inspection Made: (attach record)	_____
Itemized Cost Statement Attached:	_____
Staff Names:	_____

The following records are requested (please be as specific as possible, and attach additional paper, if necessary).

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Reasonable cost for copying, search, and computer time may be assessed in connection with this request. A current schedule of costs appears in Policy 2-2.1.

\_\_\_\_ Check here to request advance determination of cost.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

Return completed form to:  
Mecklenburg County Public Schools  
175 Mayfield Drive, P.O. Box 190  
Boydton, VA 23917  
PH: (434) 738-6111 FAX: (434) 738-6679