

**Policy: Appendix - Kansas Open Records Act Procedures (Form A-1) 218.01a**

JOHNSON COUNTY COMMUNITY COLLEGE  
REQUEST FOR RECORD INSPECTION/RECORD COPY  
(To Be Completed by Requester)

NAME:  
ADDRESS: (Street)

(City, State, Zip)

PHONE NO: ( ) SIGNATURE:

RECORDS SOUGHT: Please provide as specific a description as possible of the records you desire to inspect and/or have copied.

Inspection Copy Record Title/Date

CHARGES: A charge for providing access to or copies of public records is authorized by state law and has been established by the college. The charge is set at a level to compensate the college for the actual cost incurred in honoring your request. There will be no charge for inspection of any public record which is readily available; however, a record inspection fee will be charged at the hourly rate of the employee engaged in a record search. The charge for photocopying public records will normally be \$.10 per copy. Prepayment of inspection and/or copying fees may be required if the total fee is estimated to exceed \$10.00.

The charge to you for inspection or copies of the records you requested is: \$\_\_\_\_\_

(To Be Completed by Record Custodian)

Requested: Date \_\_\_\_\_ Access Provided: Date \_\_\_\_\_  
Time \_\_\_\_:\_\_\_\_ AM PM Time \_\_\_\_:\_\_\_\_ AM PM

Staff Time Involved: \_\_\_\_\_ Hours \_\_\_\_\_ Minutes = \$ \_\_\_\_\_  
Number of Copies: \_\_\_\_\_ Charge = \$ \_\_\_\_\_

Total Charges \$  
\_\_ Prepaid \_\_ Paid \_\_ Billed (Acct. #4-02-01-4906-000-01)

\_\_\_\_\_  
Records Custodian