UTAH GOVERNMENT RECORDS REQUEST FORM

TO: (Name	of government office holding the records and/or name of agency contact person.)
	ss of government office:
Description of records sought (records must be described with reasonable specificity):	
	like to inspect (view) the records.
	like to receive a copy of the records. I understand that I may be responsible for fees associated with charges or research charges as permitted by UCA 63-2-203. I authorize costs of up to \$\\$.
UCA 63	3-2-203 (4) encourages agencies to fulfill a records request without charge. Based on UCA 63-2-203 (4), I am requesting a waiver of copy costs because:
	releasing the record primarily benefits the public rather than a person. Please explain:
	I am the subject of the record.
	I am the authorized representative of the subject of the record.
	My legal rights are directly affected by the record and I am impoverished. (Please attach information supporting your request for a waiver of the fees.)
If the requested i	records are not public, please explain why you believe you are entitled to access.
	I am the subject of the record.
	I am the person who provided the information.
	I am authorized to have access by the subject of the record or by the person who submitted the information Documentation required by UCA 63-2-202, is attached.
	Other. Please explain:
□ I am rec	questing expedited response as permitted by UCA 63-2-204 (3)(b). (Please attach information that shows
your sta	itus as a member of the media and a statement that the records are required for a story for broadcast or tion; or other information that demonstrates that you are entitled to expedited response.)
Requester's I	Name:
Mailing Add	ress:
Daytime telephone number:Date:	
Signature:	