



CITY OF PERRIS

Office of the City Clerk

101 North "D" Street
 Perris, California 92570
 Phone: (951) 943-6100
 Fax: (951) 943-4246
 Email: cityclerk@cityofperris.org

FOR OFFICE USE ONLY	
Received:	
Due:	
Completed:	
Initials:	

PUBLIC RECORDS REQUEST

(Government Code Sec. 6257)

(Gov't Code Sec. 6257)

"Except with respect to public records exempt by express provisions of law from disclosure, each state or local agency, upon any request for a copy of records, which reasonably describes an identifiable record, or information produced therefrom, shall make the records promptly available to any person, upon payment of fees covering direct costs of duplication, or a statutory fee, if applicable."

() I am requesting a copy of a public record specifically identified as:

Date:

Signature: _____

Name:

Address:

Phone:

Email:

(TO BE COMPLETED BY CITY CLERK'S OFFICE)

Standard Paper Copy 1 st page:	.50 =	\$ _____	() Copies to be mailed to requester
Standard Paper Copy 2 nd page & after	.20 =	\$ _____	
FPPC Documents:	_____ @ .10 =	\$ _____	() Copies to be picked up by requester
Number of Audio Tapes:	_____ @ 7.00 =	\$ _____	
Number of Video Tapes:	_____ @ 14.00 =	\$ _____	
Number of CD or DVD:	_____ @ 14.00 =	\$ _____	Processing Time: _____ Hrs. _____ Min.
Number of Certified Copy	_____ @ 10.00 =	\$ _____	
Mailing Cost:		\$ _____	
Subtotal:		\$ _____	
Tax: Acct. Number 801-2201	@ 7.75% =	\$ _____	
TOTAL FEE: Acct. Number 001-4511		\$ _____	Date Fee Received: _____
Mailed by: _____	Date: _____	Picked up by: _____	Date: _____