

# Request for Open Public Records



## Contact Information:

Name of Requester (required):	Organization:
Street Address/PO Box:	City: State: Zip:
Daytime Phone:	Email Address:

(Response will be provided within three (3) full business days from the date of request)

### RECORD FEES (To be completed by Record Custodian)

*The Kansas Open Records Act* authorized public agencies to charge reasonable fees (which may be requested in advance) for providing access to or furnishing copies of public records.

Retrieval Time: \_\_\_\_\_ Hours \_\_\_\_\_ Minutes **X** \$5.00 per 10 minutes = \$ \_\_\_\_\_  
Duplication: \_\_\_\_\_ Pages **X** \$0.15 per page = \$ \_\_\_\_\_  
Other (may include postage, data processing, etc.) at actual cost: \_\_\_\_\_ = \$ \_\_\_\_\_  
**TOTAL FEE DUE** = \$ \_\_\_\_\_

(It is SAA's policy not to charge for retrieval time of less than 5 minutes or duplication of less than 10 pages)

**YOUR COPY OF THIS FORM SHALL SERVE AS YOUR RECEIPT**

### RESULT OF RECORD REQUEST (To be completed by Record Custodian)

Was the Request Fulfilled? (please circle): **YES / NO** If "YES", date provided: \_\_\_\_\_

If "NO", reason for not providing request (please check):

- |  |  |
|--|--|
| <input type="checkbox"/> Request not in record form  | <input type="checkbox"/> Record does not exist.  |
| <input type="checkbox"/> Request not specific enough | <input type="checkbox"/> Record is closed per K.S.A 45-221   |
| <input type="checkbox"/> Other (please specify)      | <input type="checkbox"/> Record restricted by Federal law, State statute, or Kansas Supreme Court decision |
- \_\_\_\_\_  
\_\_\_\_\_

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

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

### Method of Receipt:

- ☐ I will pick up. Please contact me at the phone number/email address listed above when ready.  
☐ Forward records to the address provided.  
☐ Forward records to the email address provided.

**Request:** I request from the Salina Airport Authority the following records (please be specific):

**Purpose:** I request the records for the purpose of: (Optional)

**\*\* Request to be submitted via email to [wings@salair.org](mailto:wings@salair.org). Failure to submit the request to the correct email address can result in delays. \*\***

I hereby declare that I do not intend to and will not:

- Use any list of names or addresses contained in or derived from the records or information for the purpose of selling or offering for sale any property or service to any person listed or to any person who resides at any address listed; or
- Sell, give, or otherwise make available to any person any list of names or addresses contained in or derived from the records or information for the purpose of allowing that person to sell or offer for sale any property or service to any person who resides at any address listed.

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

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