

**OCEANSIDE CITY CLERK DEPARTMENT
PUBLIC RECORDS REQUEST FORM**

Pursuant to the California Public Records Act, Government Code section 6250 et seq., the City must **respond** to a Public Records Request within ten (10) calendar days. Actual release of the records need not be made within this ten-day period, but should not be unreasonably delayed. The request will be processed and you will be contacted to pick up the completed records. Records are not released until payment is received. If you are requesting a large volume of documents you may be required to post a deposit towards the estimated cost of producing the records at the time of this request. Records may be mailed upon receipt of duplication cost plus postage.

Please Note: Law enforcement or investigative records and litigation-related records are exempt under the Public Records Act.

COST: Paper copies	\$.10 per page
Electronic records	\$ 1.00 per CD <u>OR</u> \$10 per 8GB USB Flash Drive
Event/Meeting- Audio	\$ 5.00 per meeting + \$ 1 per CD <u>OR</u> \$10 per 8GB USB Flash Drive
Event/Meeting - Video	\$10.00 per meeting + \$ 1 per DVD <u>OR</u> \$10 per 8GB USB Flash Drive
Plans	\$10.00 per page (electronic or hard copy)
Postage, if applicable	Actual Cost

Date of Request _____

Name of Company Requesting Records: _____

Name of Individual Requesting: _____

Address: _____ City: _____ State: ___ Zip_____

Do you have Microsoft Outlook? ___ Yes ___ No

Telephone: (____)_____ E-mail: _____

SUBJECT OF REQUEST: (Be specific i.e., name(s), timeframe, date(s), event(s), incident(s) etc.:

I agree to pay the required deposit if I am requesting records over fifty dollars (\$50). I understand that the records will not be reproduced until my deposit is received. I agree to pay the remaining cost/entire cost of reproducing the records upon notification that the records are available. I acknowledge that the records will not be released until I have paid for the records in full.

DATED: _____ **SIGNATURE:** _____