

School Board

Exhibit - Inspection Report for District Records

Superintendent or designee completes at time of inspection.

Name of Individual(s) Requesting District Records

Organization

Address

Telephone Number

City

State

Zip

To be completed by the staff member present at the requested record inspection or who provided requested copies.

The individual(s) listed above has completed/or picked up requested copies at the District's main office.

Amount of copy fees paid \$_____.

Copies were mailed to the above listed address.

Staff Member Present at Inspection or Who Provided Copies

Date of Inspection and/or Copies Provided or Mailed