

City of Bloomfield

REQUEST TO INSPECT PUBLIC RECORDS

Date: _____

To: **Erikka A. Martinez**
Record Custodian
City of Bloomfield
915 N First St.
PO Box 1839
Bloomfield, NM 87413

From: _____

I would like to inspect and copy the following documents:
[List records with reasonable particularity]

If your agency does not maintain these public records, please let me know who does, and include the proper custodian's name and address.

I promise to pay \$.25 per page for copying charges. If the copying charges will exceed \$_____, please call me to discuss. I understand that I may be asked to pay the fee for copies in advance before you make any copies.

Please provide a receipt indicating the copying charge for each document.

Thank you for your prompt attention to this matter.

Name: _____ Signature: _____

Address: _____

Phone Number