#### **BOARD OF COMMISSIONERS**

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SUZY WATKINS TY GREEN PHILLIP J. SEXTON, CPA Harbor Director Legal Counsel Treasurer

**Signature** 

# **Port San Luis Harbor District Request for Public Records**

#### Part A

#### To be Completed by Requestor

The California Public Records Act (Government Code 6250. et seq.) was enacted to ensure public access to public records. This form will enable us to accurately and efficiently fill your request. Photocopies are .36¢ per page. Audio CDs of Harbor Commission meetings are \$5.00 each. No charge for electronic copies.

Name:		Date of Request:
Company:		
Address:		
Phone:	Fax:	Email:
I request to review the	e following documer	nt title(s) or subject(s):
Title or Subject		Approximate Date(s) of Document
1	<u>-</u>	1
2	<u>-</u>	2
3		3
* Extra pages may b	e attached if more	e than 5 documents are being requested.
Is the information bei involving the District		ection with a subpoena, claim, or pending or possible legal action acy or division?
Yes	No_	
If yes, please explain:		

### To Be Completed by District Staff

## Check where applicable and complete necessary information:

NAME	POSITION DATE			
1.	If any additional action, or action other than as described above, was or is to be taken, pleas briefly explain:			
C.	OTHER OR ADDITIONAL ACTION:			
2.	Date requestor was notified that documents could not be located:			
1.	The records could not be located from the information provided.			
В.	RECORDS ARE NOT LOCATED:			
4.	Date the records are available for review by requestor:			
3.	Requestor has been notified of date set for review of documents.			
2.	Payment in the amount of \$ received for requested records.			
1.	Date Records were mailed / emailed / faxed to requestor:			
Α.	RECORDS LOCATED:			