



OPEN RECORDS REQUEST

Media General Public

Information Requested:

E-MAIL ADDRESS

Purpose of Request: Personal Commercial Public Interest

NAME OF PERSON MAKING REQUEST (Please Print Name)

ADDRESS

CITY

STATE

ZIP

PHONE

FAX

SCHOOL OR COMPANY OF REQUESTOR

SIGNATURE

DATE

Any copies will be made in accordance with the fee schedule and procedure established by the Oklahoma State Department of Education pursuant to the Oklahoma Open Records Act, 51 O.S. § 24 A. 1 et. seq.

RETURN FORM TO: Oklahoma State Department of Education
2500 North Lincoln Boulevard
Oklahoma City, Oklahoma 73105-4599
Phone: (405) 521-4906 Fax: (405) 522-6256
Email: OpenRecordsRequest@sde.ok.gov

Do NOT send money prior to our notification of the exact amount due. We will contact you when the request is filled. Thank you.