BEAUREGARD PARISH SCHOOL BOARD PUBLIC RECORDS REQUEST FORM

Name	C	Organization Name, if applicable		
Address	C	ity	State	Zip Code
Phone Number F	ax Number	Federal Tax ID # of Organization or Social Security Number of Requestor		
Description of Public Records Req	uested:			
Action Requested: (check appropr Have records segregated for in requested dates (You will be notified of the date)	-person review at the B			
 Have copies made and pick the upon pick-up by check or money 		•		
□ Have copies made and emailed	I to me. There is no cha	rge for electron	ic copies.	
I hereby request that copies of the for the actual cost of the copies red my request. I also understand that	juested, and I agree to p	ay the cost of th		-
Signature			Date	
Step 2: Submit completed form to: DeRidder, LA 70634 or Fax to 337		.arry Hollie, Տսր	perintendent, 20	2 W . Third Street,
	To be Completed by	Custodian of R	ecords	
Est. # of pages to be copied	Est. postage cost \$		Γotal Est. Cost :	\$
Step 3: Pay or make arrangements estimated cost of \$ is rof estimated cost is made and you	not received (or arrange	ments made fo	r pick up) withir	
	To be Completed by			
Total number of copies made:	Payment r	eceived for cop	ies \$	
Date copies mailed/picked up:	(Initial by (Custodian of Re	ecords or his/he	r designee)