



City of Anaheim

Office of the City Clerk

200 S. Anaheim Blvd., Suite 217
Anaheim, CA 92805
(714) 765-5166 • fax (714) 765-4105
www.anaheim.net

Request for Public Records

STEP 1: **COMPLETE** all fields on this form. This form is to facilitate and expedite the processing of your public records request. Describe identifiable records in the possession of the City; your request must be sufficiently focused and specific to allow the City to locate the requested record(s).

STEP 2: **SUBMIT** completed form by mail, fax, email or in person to Custodian of Records, Office of the City Clerk, 200 S. Anaheim Blvd. (714) 765-5166; tbass@anaheim.net fax: (714) 765-4105

STEP 3: **WAIT** to receive an invoice for responsive records. The City shall determine within 10-days from receipt of a public records request, whether the request, in whole or in part, seeks copies of discloseable public records in possession of the City [GC 6253(c)]. Please note that if you are requesting the opportunity to inspect records, you will be requested to make an appointment to return at a later date/time to view the documents.

Charges for the direct cost of duplication will apply. **Documents will not be copied until payment has been received.** If payment is not received within 10 days after invoice is sent, you may be required to submit a new request. Please see backside for additional information.

REQUESTER INFORMATION

Full Name: Christopher Whetzel Date: 9/5/19 11:11 AM

Company Name: Edge Point

(Mailing) Address: _____ City/State/Zip Code: Nokesville, VA 20181

Phone number: _____ Email: _____

Preferred method of contact in the event of questions:

Phone

DESCRIPTION OF REQUESTED RECORD(S): (Describe the specific public record(s) e.g., date, type, time period covering documents requested etc)

Edge Point Contracting, Inc. hereby requests a copy of the following in electronic format and/or whatever format exists:

1. *An accounting of all uncashed checks/warrants and returned checks that have been issued by your government agency and have remained outstanding for six (6) months or older as of the date of this letter. Please only include items that can still be claimed by the payee and have not been escheated to the state.*

- *Please include the payee name, date, amount and check number.*
- *If it is less time consuming and more cost effective, please only provide amounts which equal \$250.00 or more*
- *Please include the last known address of the payee.*

2. *An accounting of any unclaimed funds which have not been escheated to the state.*

- *Please include the payee name, date, amount, and last known address.*
- *Please only provide amounts which equal \$250.00 or more.*

The information entered to request for public records is continued on succeeding page(s)

I understand that I will be contacted once documents have been identified. If production of records is requested, an estimated cost will be provided to me and I agree that I will be required to submit payment for duplication costs (and mailing) prior to the production of the requested documents.

I wish to inspect City records

Will Pick-Up Records

Please Mail

Electronically Signed/Submitted 9/5/19 11:11 AM

SIGNATURE OF REQUESTER



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DESCRIPTION OF REQUESTED RECORD(S)-Continuation

**Responsive documents may be provided electronically is possible*