



DEPARTMENT OF JUVENILE JUSTICE
OPEN RECORDS REQUEST TO INSPECT PUBLIC RECORDS
(KRS CHAPTER 61)

DATE: _____

Please Note: It is important that you write legibly and be specific. When applicable, include the Solicitation, RFB and/or RFP number along with the specific documents you are requesting. Without the descriptive name and/or identifying number, the request will be deemed non-responsive.

I request to inspect and/or receive copies of the following:

DOCUMENT FEE: \$.10 PER PAGE

REQUESTOR'S INFORMATION:

Printed Name

Company Name

Mailing Address

City/State and Zip Code

Phone Number

FAX Number

Email Address

EMAIL COMPLETED FORM TO: DJJopenrecords@ky.gov

or

FAX COMPLETED FORM TO: 502-573-4308