



Colorado Open Records Act (CORA) Request

Attention Director of Administration

To be Completed by Requester:

Name:	
Company:	
Phone Number:	
Mailing Address:	
Email Address:	

Are you requesting to inspect documents? _____

Are you requesting copies of documents? _____

Please provide detailed description of records you are requesting:

To be Completed by Genesee Water & Sanitation District:

Estimated Research Cost:	
Estimated Copying Cost:	
Deposit Required:	

Request Received by:

Name: _____ Date: _____

Signature: _____

Comments: