



STATE OF NEVADA
GOVERNMENT EMPLOYEE-MANAGEMENT
RELATIONS BOARD
Public Records Request

Deliver or Mail to:
3300 W. Sahara Avenue, Suite 490
Las Vegas, NV 89102

Or E-mail requests to:
Kelly Valadez
Executive Assistant
kelly.valadez@business.nv.gov

Date of Request	
Requestor Contact Information	
Name:	
Organization:	
Address:	
City, State, Zip:	
Phone:	
E-mail:	

Records Requested:	
Check one: <input type="checkbox"/> Paper copies <input type="checkbox"/> Electronic copies <input type="checkbox"/> Certified copies <input type="checkbox"/> Inspection (in person)	
<i>Please be specific and include as much detail as possible regarding the records you are requesting.</i>	

<i>To complete an estimate, the agency will need the following information:</i>			
<input type="checkbox"/> I will pick up	<input type="checkbox"/> Please FedEx <i>Fed Ex billing number:</i>	<input type="checkbox"/> Please send USPS	<input type="checkbox"/> E-mail (if format allows)

Statement	
<input type="checkbox"/> I understand there might be a charge for copies of public records. I understand I will receive a written estimate for production of the records indicated above if the estimated cost is expected to be over \$25.00, which I will be required to pay in full prior to inspection or reproduction. Materials will be held for 30 days.	
Requester Signature	<hr/> <div style="text-align: center;">Signature</div>

Office Use Only	
Request status:	Estimate:
Date	
Request received	Estimate: \$ _____
Receipt acknowledgement issued	Date deposit received _____
Request filled	Actual (if different): \$ _____
Estimated completion	Date final payment received _____
Estimate provided	Completed by _____
Request denied in whole	
Other:	

Retain request form for 90 days following completing of request.