Town Clerk
20120 E. Mainstreet, Parker, CO 80138
Phone: 303.805.3198 Fax: 303.840.9792
Email: clerk@parkeronline.org

REQUEST FOR INFORMATION
PURSUANT TO THE COLORADO OPEN RECORDS ACT

DATE OF REQUEST: _____ **TIME:** _____

NAME:_____

ADDRESS: _____

_____

TELEPHONE NUMBER (During Business Hours): _____

DESCRIPTION OF THE INFORMATION DESIRED:
(Please be very specific. Use second sheet if needed.)

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

(Do not write below line – This section to be completed by the Town Clerk)

RESPONSE DATE: _____ **RESPONSE TIME:** _____
(Receipt by the Town of this request is determined by the date/time received by the Town Clerk Dept.)

METHOD OF DELIVERY: _____

NUMBER OF PAGES: _____ **AMOUNT PAID:** _____

BY: _____ **TITLE:** _____

DENIAL OF REQUEST AND BASIS FOR DENIAL (If applicable):

_____
_____
_____
_____
_____

(Pursuant to the Colorado Open Records Act, the Town of Parker has 3 business days in which to respond to this request.)