



Document Request Form

Date of Request: _____

Requester: _____

Address: _____

Type of Request: Electronic _____ Hard Copy _____

Email for Electronic Documents: _____

Description of Documents: _____

Purpose of Document Request: _____

Signature of Requester

Date Request Received

Office Use: Number of Copies: _____ Time Spent: _____

Signature of Records Staff

Date Request Completed

***Please note request will be completed within 10 working days.**

1. No charge shall be made to obtain copies of Club Articles of Incorporation, Bylaws, Covenants and/or Resolutions.

2. There shall be no charge for inspecting or reviewing records during normal business hours of the Club unless office staff assistance over 0.5 hours is required.

3. Assistance or retrieval of records by Club office staff, in excess of 0.5 hours, shall incur a charge of \$14 per half hour.

4. Copying and electronic mailing costs of records shall be at the rate of 5 cents per page.

5. Mailing and postage for requested documents shall be charged at actual cost.

3/12/26