

**Brian Sandoval** 

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## Silver State Health Insurance Exchange

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exchange.nv.gov

## PUBLIC RECORDS REQUEST

## Deliver, Mail, or Fax to:

Attn: Public Records Request Silver State Health Insurance Exchange 2310 S. Carson Street, Suite 2 Carson City, NV 89701

Date of			
Request			
Requestor Contact Information			
Name:			
Organization:			
Address:			
City, State, Zip:			
Phone:			
E-mail:			
Records Requested:			
Check one: Paper copies Electronic copies Certified copies Inspection (in person)			
Please be specific and include as much detail as possible regarding the records you are requesting.			
To complete an estimate, the agency will need the following information:			
☐ I will pick up	☐ Please FedEx	☐ Please send USPS	E-mail (if format
	Fed Ex billing number:		allows)
Statement			
I understand there is 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. If not retrieved,			
advanced payment will not be returned.			
Requester			
Signature -	Signature Required		
Signature		<u> </u>	

A request for public records need not be made on this form and may be made verbally, as long as the request is not extraordinary and otherwise readily identifiable as a request for public records.