



ARIZONA STATE RETIREMENT SYSTEM (ASRS)
PUBLIC RECORDS REQUEST

PLEASE PRINT

COMPLETE AND SEND TO:
 ASRS
 PUBLIC RECORDS
 PO Box 33910
 Phoenix, AZ 85067-3910

Phoenix (602) 240-2000
 Tucson (520) 239-3100
 Toll-Free (800) 621-3778
 www.azasrs.gov

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|--|---------------|-----------------|------------------|
| SECTION 1 – Request Information | | | |
| Description of Records Requested (Use separate paper if necessary.) | | | |
| | | | |
| | | | |
| | | | |
| How you would like the records provided. | | | |
| <input type="checkbox"/> View on-site at ASRS <input type="checkbox"/> Electronic Copy (if available) <input type="checkbox"/> Paper Copies | | | |
| Indicate the intended use of the records: | | | |
| <input type="checkbox"/> Non-Commercial <input type="checkbox"/> Commercial | | | |
| If the copies are for commercial use, describe that use. (Be specific.) (A.R.S. § 39-121.03) | | | |
| | | | |
| | | | |
| If the information is for commercial use, what is its estimated commercial value? (A.R.S. § 39-121.03) | | | |
| \$ | | | |
| I certify that the requested records shall be used only for the purpose(s) indicated above and that information provided is a true and accurate statement. | | | |
| Signature | | | Date |
| Company Name | | Contact Person | |
| Phone Number | | Email Address | |
| SECTION 2 – ASRS Use Only | | | |
| Authorization to Proceed (Signature) | | | Date |
| If denied, explain reason: | | | |
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| | | | |
| Number of Pages Copied | Cost Per Page | Staff Time Used | Commercial Value |
| Date of Completion | Total Cost | Delivery Date | Amount Received |
| Date | Notes | | |