

**POLICY AND PROCEDURE FOR  
OBTAINING COPIES OF OR ACCESS TO PUBLIC RECORDS  
PURSUANT TO THE KANSAS OPEN RECORDS ACT- KORA  
K.S.A. 45-215 ET SEQ.**

**OFFICE HOURS:** Lakeshore Estates Improvement District has no official operating hours as the District has no employees.

**DESIGNATED CUSTODIAN:** Lakeshore Estates Board of Directors, email: [lakeshore244@gmail.com](mailto:lakeshore244@gmail.com)

**OPEN RECORDS REQUESTS:** The Kansas Open Records Act grants you the right to inspect and obtain copies of public records created or maintained by public agencies in Kansas. The Open Records Act, K.S.A. 45-215, et seq., as amended, declares that it is the public policy of Kansas that, generally, “public records shall be open for inspection by any persons.” Public records are defined as “any recorded information, regardless of form or characteristic, which is made, maintained or kept by or is in the possession of any public agency.” Lakeshore Estates Improvement District is a public agency for the purposes of this Act.

**Examples of open public records maintained by Lakeshore Estates Improvement District**

- By-laws
- Meeting Minutes/Records once approved by the Board
- Financials

**FEES**

- **COPIES** will be charged at 10¢ per page for paper copies after the first 10 copies;
- **MAILING** will be charged at 50¢ for first 5 pages, 25¢ for additional 5-page increments for paper copies;

**Additional fees**, including any other costs incurred by the agency in connection with complying with a record request may be assessed to the requestor.

**ADVANCE PAYMENT OF FEES REQUIRED**

The agency will provide the requestor with an estimate of the fees before gathering and processing or providing access to the records. The estimated fees **MUST be paid BEFORE** Lakeshore Estates Directors process the request or provides access to the requested records.

While we do our best to provide an accurate estimate of the fee, it is possible that the records can be produced for less than the estimated amount. If so, any additional amounts will be refunded.

However, it is also possible that we will discover the estimated fee is low once the actual processing work is started. If we discover that the estimated fee is too low, we will promptly advise the requestor any correction to the fee, and request advance payment of any additional costs before continuing the work.

Payment may be made by check or money order **payable to Lakeshore Estates Improvement District**. Returned checks will incur an additional fee of \$30.00.

### **WRITTEN REQUEST**

To assure that the request is clearly understood, the agency requires requests for access to or copies of records be made in writing. All requests for records must state:

- The requestor's name,
- Mailing address,
- A phone number where the requestor can be contacted, and
- Detailed information about the records being requested. This will help determine if the requested records exist and are in the agency's possession. Requests for records not yet in existence or documents to be created prospectively cannot be honored.

For the convenience of requestors, a form that may be used to make the request is attached at the end of this policy. This form is not required to be used.

### **RESPONSE TIME**

The Directors will act upon requests as soon as possible, with some response being made to the requestor no later than the third business day following the receipt of the request. If it appears that additional time will be needed, fees will be assessed, or some of the records may be closed by law, a written response will be provided as soon as the records have been located and reviewed.

Date:

Board of Directors  
Lakeshore Estates  
Improvement District  
9550 Panorama Dr.  
Ozawkie, KS 66070

RE: Open Records Request

Dear Board of Directors:

Under the Kansas Open Records Act (KORA), K.S.A. 45-215 *et seq.*, I request access to or copies of the following records (*please be as specific as possible in describing the records you want and the time period your request covers; attach additional pages if necessary*):

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I request the information be provided in the following format if possible (please check one):

Paper

Electronic

My contact information is:

Name: \_\_\_\_\_ Daytime Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City State Zip Code

Email Address: \_\_\_\_\_

I certify that I do not intend to, and will not: (A) Use any list of names or addresses contained in or derived from the records or information for the purpose of selling or offering for sale any property or service to any person listed or to any person who resides at any address listed; or (B) sell, give or otherwise make available to any person any list of names or addresses contained in or derived from the records or information for the purpose of allowing that person to sell or offer for sale any property or service to any person listed or to any person who resides at any address listed.

Sincerely,