



Elephant Butte Irrigation District

REQUEST FOR ELECTRONIC PUBLIC RECORDS

DATE: _____

TO: Records Custodian

Elephant Butte Irrigation District
530 S. Melendres Street
Las Cruces, NM 88005
575-526-6671

FROM: _____

Name of Requester

Email address

Mailing Address

City, State and Zip Code

Telephone Number

I request that you provide me a digital copy of the following electronic records (must be specific), if they exist:

_____ I request that you send the records to the following email address: _____

_____ I request that you download the records on a thumb drive that I will provide.

If your agency does not maintain these public records, please let me know who does, and include the proper custodian's name and address.

I promise to pay not more than \$100.00 per request. I understand that I may be required to pay the fees charged in advance of receiving the documents requested.

Thank you for your prompt attention to this matter.

Signed: _____