



**PUBLIC PROTECTION CABINET
DEPARTMENT OF FINANCIAL INSTITUTIONS**

Department of Financial Institutions
500 Mero Street, 2SW19 Frankfort, KY 40601
Phone: (502) 573-3390
www.kfi.ky.gov

REQUEST TO INSPECT PUBLIC RECORDS

DATE: _____

TO: **Open Records Custodian, Department of Financial Institutions**

1. I hereby request to inspect or receive copies of the following records (*please be specific*):

2. In lieu of inspection, select the format in which you would like to receive the requested records:

- CD - \$1 each
- Paper copies - \$.10 per page
- PDF File attached to an email (limited availability)

You will be notified of the amount due once the records are available.

3. Attach certification of Commercial or Non-commercial Purpose.

Sign Name: _____	Print Name: _____
Company Name: _____	Email: _____
Address: _____	Phone: () -

PLEASE NOTE:

- Records containing confidential information may not be available for inspection. In lieu of inspection, the agency will provide copies of the requested records with confidential information redacted.
- Requestor's payment must be received prior to document release.
- Make check or money orders payable to the Kentucky State Treasurer.
- Do not submit payment until you receive a fee request letter.

INSTRUCTIONS FOR COMPLETION: ALL REQUESTS MUST BE SIGNED, LEGIBLE, AND CONTAIN THE INFORMATION SET FORTH IN THIS FORM. The request may be submitted as an electronic PDF file. All requests must be submitted to the attention of the Open Records Custodian as follows:
Email: kfi.records@ky.gov; or by mail or in person to: Kentucky Department of Financial Institutions, Department of Financial Institutions 500 Mero Street, 2SW19 Frankfort, KY 40601



CERTIFIED STATEMENT OF NON-COMMERCIAL PURPOSE

* * * * *

I hereby certify under penalty of law that, pursuant to KRS 61.874(4) & (5), the records requested by me on the _____ day of _____, 20____, from the Kentucky Public Protection Cabinet, Department of Financial Institutions, are not for a commercial purpose.* I further certify and affirm that I shall not use or knowingly allow the use of these records for a commercial purpose.

This the _____ day of _____, 20_____.

Sign Name:	Print Name:
Company Name:	Email:
Address:	Phone: () -

* This term is defined in KRS 61.870(4) as follows:

“Commercial purpose” means the direct or indirect use of any part of a public record or records, in any form, for sale, resale, solicitation, rent, or lease of a service, or any use by which the user expects a profit either through commission, salary, or fee.

“Commercial purpose” shall not include: (1) publication or related use of a public record by a newspaper or periodical; (2) use of a public record by a radio or television station in its news or other informational programs; or (3) use of a public record in the preparation for prosecution or defense of litigation, or claims settlement by the parties to such action, or the attorneys representing the parties.

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Email: kfi.records@ky.gov; or by mail or in person to: Kentucky Department of Financial Institutions, Department of Financial Institutions 500 Mero Street, 2SW19 Frankfort, KY 40601



CERTIFIED STATEMENT OF COMMERCIAL PURPOSE

* * * * *

I hereby certify under penalty of law that, pursuant to KRS 61.874(4) & (5), the records requested by me on the _____ day of _____, 20____, from the Kentucky Public Protection Cabinet, Department of Financial Institutions, are for a commercial purpose.* The commercial purposes for which the records shall be used are as follows:

This the _____ day of _____, 20_____.

Sign Name:	Print Name:
Company Name:	Email:
Address:	Phone: () -

* This term is defined in KRS 61.870(4) as follows:

“Commercial purpose” means the direct or indirect use of any part of a public record or records, in any form, for sale, resale, solicitation, rent, or lease of a service, or any use by which the user expects a profit either through commission, salary, or fee.

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