



MORONGO BASIN HEALTHCARE DISTRICT

6530 La Contenta Road, Suite 100, Yucca Valley CA 92284 | 760.820.9229

REQUEST FOR PUBLIC RECORDS FORM

Morongo Basin Healthcare District (hereafter “District”) encourages public participation in the governing process and provides reasonable accessibility to all public records except those documents that are exempt from disclosure by express provision of law or considered confidential or privileged under the law.

The District has ten days to respond to any request for a copy of public documents by indicating whether or not the documents exist and will be made available. Actual production of the documents may take somewhat longer depending upon their availability and staff workload. You may be notified within the ten-day period that additional time is necessary.

To assist us in providing a timely response to your request, please fill out the form below and indicate the specific record/document you wish to review. If you do not know the precise identification of the document, please describe its contents as clearly as possible. Unless otherwise requested, the materials will be emailed as a pdf file. Minutes of Board of Directors meetings, District annual budget and financial audits are available at MBHDistrict.org/board-directors/#agenda.

Please forward this completed form to Board Clerk kgraley@MBHDistrict.org or mail to Board Clerk, Morongo Basin Healthcare District, 6530 La Contenta Road #100, Yucca Valley CA 92284.

Your name: _____ Phone: _____

Your organization: _____

Email address: _____

Record or documents requested:

REQUEST FOR PHYSICAL COPIES:

- I request _____ paper copies of the above listed document(s) at \$.10 per page.
- I will pick up the document(s) from the District office located at 6530 La Contenta Rd, #100, Yucca Valley.
- Please mail the document(s) to the following address:

Signature of requesting person: _____ Date: _____

DISTRICT USE ONLY

Is written authorization required? Yes No Date authorization was received _____

Request fulfilled by email U.S. Mail service

Request denied by _____ . Notification made on _____