## OFFICIAL RECORDS REQUEST FORM

TO: Board of Directors of \_\_\_\_\_

s.718.111(12), F	er and Member of the Condominium Association and pursuant to lorida Statutes, the undersigned hereby requests to inspect and copy cial records of the Association:
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This written request is made pursuant to s. 718.111(12), Florida Statutes, and has been sent via certified mail. Florida law requires that "The records of the association shall be made available to a unit owner within 5 working days after receipt of written request by the board or its designee." Further, "The failure of an association to provide the records within 10 working days after receipt of a written request shall create a rebuttable presumption that the association willfully failed to comply."  Please provide the undersigned with an appointment to review the records requested above. I will call you for the appointment time in the next 5 days. Thank you.	
	you for the appointment time in the flext 3 days. Thank you.
Signature:	·
Printed Name:	·
Address:	
Phone Number:	
Date:	