

REQUEST FOR INFORMATION

Pursuant to the Public Information Act, Texas Government Code, Section 552, I hereby request the following information currently existing in the records of the City of Pottsboro, Texas:

List information as specifically as possible, including name, dates and case numbers, if known.
Attach a separate sheet to this form if necessary.

___ I wish a copy of the requested information. I understand that I must pay ten cents (.10¢) per page for standard size paper copies. Information copied on oversized paper, cassette tapes or computer disks and photographs will require additional charges.

___ I will pick up the copies. Please call me at _____ when they are ready.

___ I do not want copies, but wish only to inspect the requested information. Please call me at _____ to schedule a time when the records will be available.

___ I would like the information provided by e-mail. Please e-mail me at _____ when they are ready.

___ Please mail the information to me at the following address:

In making this request I understand that the City is under no obligation to create a document to satisfy my request or to comply with a standing request for information. I further understand that the information will be released only in accordance with the Public Information Act, which may require a determination as to confidentiality by the Texas Attorney General prior to a release. I further understand that the City has 10 business days in which to request such a determination.

Date

Requestor's signature

Requestor's Phone Number

Requestor's printed name

CITY USE ONLY	
Date received	
Employee receiving request	
Date forwarded to legal	
Date information released	
Employee releasing info	
Misc. comments/instructions	