

OPEN RECORDS REQUEST FORM

FROM:

Name: _____

Address: _____

Telephone No. () _____ - _____ (Home) () _____ - _____ (Work)

() _____ - _____ (FAX)

TO: CUSTODIAN OF RECORDS FOR THE CITY OF BRUCEVILLE-EDDY

Pursuant to V.T.C.A., Government Code, Section 551.001 <i>et seq.</i> , I am requesting certain public records, specifically:

<input type="checkbox"/>	MADE AVAILABLE TO ME FOR EXAMINATION ONLY. I understand that if the documents are not readily available, the custodian may schedule a date and hour within a reasonable time for my examination of the documents. I understand that I must complete my examination within ten days of the date the records are made available to me.
<input type="checkbox"/>	PHOTOCOPIED for my use where the information sought is in the form of paper (see reverse side for charges).
<input type="checkbox"/>	DUPLICATED for my use where the information sought is in the form of audiotapes, videotapes, computer tapes, or other similar recording systems (see reverse for charges)

<input type="checkbox"/>	MAILED to me at the address indicated below. (See reverse side for charges.)
<input type="checkbox"/>	FAXED to me at the number indicated above. (See reverse side for charges.)
<input type="checkbox"/>	PICKED UP by me or my representative at City Hall, 143 Wilcox Drive Suite A. Eddy, Texas 76524

I agree to pay the costs of photocopying, duplication, the labor costs involved in retrieving information that is not readily available, and the cost of mailing or faxing. In the event the estimated labor costs exceed \$6.00, I agree to pay the estimated labor costs prior to retrieval of the information.

I understand that the City of Bruceville-Eddy may withhold information which is not considered public information under the Texas Open Records Act, accompanying Attorney General opinions, and case law. I also understand that the City of Bruceville-Eddy is required to release only those documents that exist, in their current state, and that the City is not required to compile or create specific information or formats for my use.

_____ Signature Required

