

INFORMATION REQUEST FORM

Requestor's Na Mailing Addre City, State, Zip Telephone:	ess:		
Detailed Descr	ription of Information Sought:		
(Check one)	(a) I request paper copies		
	(b) I request digital copies emailed		
	(c) I request only to view at City Hall		
	(d) Other (please explain in detail)		
Requestor S	Signature Date		
For completion	n by City only		
Date Received_	RFI I.D.#		
Disposition: (a)	provided the following information for viewing:		
(b)	(date) provided copies of the following information:		
	\$(fees assessed)	_(date)	
(c)	sent to Attorney on	(date)	
(d)	AG Opinion requested on	_(date)	
(e) Notes:) AG Opinion(number) received on		_(date)
City Official As	ssigned:	(Signa	ature)