



PUBLIC INFORMATION REQUEST
 City Clerk's Office • City of Sherman

Open Records - Gov. Code Section 552.221

Name of person requesting information: _____

Name of firm or company representing (if applicable): _____

Address: _____

Contact phone: _____ Alternate phone: _____

Date and time of request: _____

Description of public record(s) being requested:

 SIGNATURE OF PERSON REQUESTING INFORMATION

<p>For Internal Use Only:</p> <p style="text-align: center;">Public Information Availability</p> <p>The records are: <input type="checkbox"/> Being used <input type="checkbox"/> In storage and unavailable for immediate inspection.</p>
<p>The public records requested will be made available for inspection on:</p> <p>Date: _____</p> <p>Time: _____ am ___ pm ___</p>
<p>Today's Date:</p>
<p>Custodian of Records: Linda Ashby, City Clerk</p>
<p>Routed to or Name of Person Responsible for these records:</p>
<p>Action by Staff:</p>
<p>Information was: <input type="checkbox"/> Mailed Date _____</p> <p style="padding-left: 100px;"><input type="checkbox"/> Picked up Received by: _____</p> <p style="padding-left: 100px;">Printed Name: _____</p> <p style="padding-left: 100px;">Date and Time: _____</p>