

State of Texas
Navarro County

City Of Rice, Texas

Request Received by mail
Request received in Person

APPLICATION FOR INFORMATION UNDER TEXAS OPEN RECORDS ACT

To: RECORDS MANAGEMENT COORDINATOR

203 E. Calhoun Street, Rice, Texas 75155

903-326-4146 or 903-326-7426 fax

Date: _____

Name of Applicant: _____

Mailing Address: _____

City / State / Zip: _____

Preferred Phone Number: _____

Alternate Phone Number: _____

Documents requested:

Provide as much information as possible to accurately describe the information and/or document(s) you are requesting, please use the back of this form for additional space if needed.

NOTE: Certain exceptions to disclose exist under the Texas Open Records Act to protect against the disclosure of confidential or privileged information. If it appears that an exception to disclosure exists, an opinion will be sought from the Attorney General's Office within ten (10) days from receipt of request.

Applicants Signature: _____

_____ Applicant picked up information Date: _____

Name of Person who picked up information Signature

_____ Request approved _____ Mailed to Applicant

Date: _____ _____ Faxed or Emailed to Applicant

_____ Number of Pages

_____ PENDING AN OPINION FROM THE TEXAS ATTORNEY GENERAL'S OFFICE

_____ Date Sent to A.G. Office

OFFICIAL SIGNATURE: _____