CITY OF JASPER, ALABAMA P.O. Box 1589 Jasper, AL 35502 | 205-221-2100

REQUEST FOR PUBLIC RECORDS

I.	Requester's C	ontact Information:		
	Name: Telephone Number: Electronic Mail: Residence Street Address: City: State: ZIP Code:			
II.	Date of Reque	ate of Request:		
III.	II. Records Requested ¹ :			
DAXA	ENT OF FEE	MAY DE DEOLUDED DEFO		
			RE YOUR REQUEST IS FULFILLED.	
IV.	By submitting this request, you acknowledge that you are an Alabama resident with standing to make a request for public records pursuant to Alabama law.			
				
			Signature	
			Printed Name	
Reques	st Received:			
Date		City Official's Initials		
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¹Be as specific as possible. A public officer is not obligated to respond to a request that is vague, ambiguous, overly broad, or unreasonable in scope, nor is a public officer obligated to respond to a request that seeks records that do not exist or materials that are not public records. Additionally, extensive requests for public records may increase the fees required to cover the administrative cost of searching and copying the requested records.