

Request for Public Information City of Alamo 420 N. Tower Road Alamo, Texas 78516 (956) 787-0006 (956) 787-6807

Email: pir@alamotexas.org

DATE:		
This is in accordance with the Texas Public Information Act an within a reasonable time) produce copies of the requested recois allowed 10 business days after the date the request is submitt	rds unless the information is exer	
REQUESTOR:	FIRM/COMPANY:	
ADDRESS:	CITY:	STATE:
PHONE NO:	EMAIL:	
Note: Please provide as much detailed information as possible bodies to create new information, perform legal research, or an already in existence. Please provide Date of Birth, Accident-Court records. Description of Public Record(s) being requested:	swer questions. The request must Incident-Arrest Date if requesti	ask for records or information ing Police Dept. or Municipal
Description of 1 ubite Record(s) being requested.		
		DOB:
reserves the right to seek an opinion from the Texas Attorney on notified in writing if the City seeks an Attorney General's opinithe production of information.		e might be fees associated with
	(BIGIWIT CI	Œ <i>)</i>
TO BE COMPLETED B	BY CITY STAFF ONLY	
ROUTED TO:	APPROVAL MUST BE GIV	EN BY CITY MANAGER
Date: By:AdmPoliceMunicipal CourtFinancePlanning Other	City Manager Signature & Date Released by / Date:	
Date submitted to CM OFFICE for approval: By: Comments:	Released to:Amount Pd. / Receipt #:	