

CITY OF CANTON REQUEST FOR PUBLIC RECORDS

Date Requested: _____

Phone: 903-567-1841

Fax: 903-567-1793

Mail: City of Canton, City Secretary, 201 N. Buffalo, Canton, TX 75103

In Person: City Hall, City of Canton, 201 N. Buffalo, Canton, TX 75103

Email: publicinfo@cantontx.gov

Name: _____

Address: _____

Email: _____

Phone: _____

I request to copy / review the following information under the Texas Open Records Act, Texas Government Code, Chapter 552. **Please be specific.**

Description of Information Requested:*

Date Range (optional)

*If the information requested is unclear, or if a large amount of information is requested, you may be contacted to discuss clarifying or narrowing your request.

I wish to be notified of the estimated cost prior to production. Yes No

The charge for standard copies (letter and legal size) shall be \$0.10 for each page up to 50 pages. For 50 or more pages, the charge shall be \$0.10 for each page plus personnel time (per Texas Administrative Code; General Services Commission, Ch. 11, Subchapter C, Rule §111.63)

- The City will strive to furnish all information that is approved as soon as possible within ten (10) business days, dependent upon the workload of employees and complexity of items requested.
- Actual records must exist; records will not be compiled or created to fill this request.
- Charges will be waived for five or fewer standard pages requiring minimal research.
- There may be a \$15 per hour charge for information over 50 pages or requiring extensive research.
- Review of original records will be conducted on premises in the presence of a city representatives.

Approved by: _____		Date: _____	
If seeking AG opinion, request date: _____		Response Date: _____	
AG Opinion: _____			
If prenotification of cost::	Date: _____	Estimate: _____	Authorized: Yes No
Date available for pickup: _____	Notified: _____		
Cost: _____	Payment: Cash	Credit	Check No. _____