City of Frost INFORMATION REQUEST APPLICATION

I, the undersigned, hereby formally request from the City of Frost the following item(s) of public information. I do hereby comply with any and all restrictions, covenants and codicils. Government Code Chapter 552 (Open Records Act).

1. State information desired:	
	Dates, if known:
2. Requesting from: (Name, Department, O	ffice, Staff Person):
3. Requesting access thereto (to inspect) only	y:
and/or actual copies to be made of	
Signature	Print Name
Address/City/State/Zip	() Telephone Number
Address/City/State/Zip	r elephone Number
FOR OFFIC	CE USE ONLY
epartment:	Date:
erson Providing Information:	
ime Spent:	No. of copies:
once completed, please return to the CITY SE	CCRETARY along with all information provided
nformation provided: \$0.10/copy X	copies \$
taff Time: (1 hour minimum) \$15.00/hr.	X
TC	OTAL COST: \$
ate Supplied	By (Staff)