

# City of Mansfield

## Freedom of Information Act (FOIA) Request Form

*Forms may be faxed, mailed, or hand-delivered*

*Retain a copy of this request for your files. If you need to file a Request for Review with the Public Access Counselor, you will need to submit a copy of your FOIA request.*

**Please Print**

Name: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

The City of Mansfield has three (3) business days to respond to this request. (Pursuant to Louisiana, R.S. 44:1 et seq.,) A minimum charge per page of letter or legal sized black and white copies will apply; however, there is no charge to inspect records only.

**Pursuant to the Public Records Act of Louisiana, R.S. 44:1 et seq., "Freedom of Information Act," I request the following public record(s) from the City of Mansfield. In order to expedite your request, please be as specific as possible.**

Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Inspection** \_\_\_\_\_ **Hard Copy** \_\_\_\_\_ **Email** \_\_\_\_\_ (Format \_\_\_\_\_) **Fax** \_\_\_\_\_

Requestor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Documents Received: \_\_\_\_\_ Date: \_\_\_\_\_

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**For City Use Only**

Date/ Time Request Received: \_\_\_\_\_ Date Request Fulfilled: \_\_\_\_\_

Date Extension requested: \_\_\_\_\_ Date Extension granted: \_\_\_\_\_

New Due Date: \_\_\_\_\_

✓ Requestor Notified:

Ready for pick-up: \_\_\_\_\_ Mail: \_\_\_\_\_ Emailed: \_\_\_\_\_ Faxed: \_\_\_\_\_