# PUBLIC RECORD REOUEST

TO: The Town Clerk of the Town of Thomaston, Alabama.

The undersigned wishes to examine the following public records of the Town of Thomaston.

The purpose of this examination is:

I recognize that the city must provide security of public records and must make available an employee of the city during the examination of such records. I understand there is a charge for requested copies and I agree to pay the fee for the copies as this policy sets out. A reasonable search fee may be charged for search time in retrieving the requested documents.



|  |  |
| --- | --- |
| Signature | Name Printed |



|  |  |  |  |
| --- | --- | --- | --- |
| Address | City | State | Zip |



Phone number Date copies received/records examined

# RESPONSE TO PUBLIC RECORD REOUEST

**Our office is open to review requested documents on Tuesdays and Wednesdays during the hours of 9:00 a.m. – 11:30 a.m.**

Town Clerk Date:

# RECORD OF PUBLIC RECORDS COPIED AND RELEASED

Number of copies received Cost

Description of copies received: