## Santa Rita Underground Water

## **Conservation District**

## **OPEN RECORDS REQUEST FORM**

*Items with an asterisk are required
*Requester Full Name:
Organization:
Requestor must provide a means of contact for delivery of information and any needed clarification of the request.
*Preferred Method of Communication:
o E-mail
o Phone
<ul> <li>Mailing Address</li> </ul>
Email Address:
Primary Telephone Number:
Cellular Telephone Number:
Mailing Address (If hard copies are requested. Hard copies subject to cost recovery.):
Fax Number:
*Detailed Description of Your Request:

			3100
*Requester Signature	); <u> </u>		
Information Act to pr appears that an exce	otect against ption to disclo	closure of public information exist under the Texas Public disclosure of confidential or privileged information. If osure exists, the requestor will be notified of such in won requested will be sent.	fit
5	Phone	equest to JJ Weatherby, District Manager e: 325-884-2893 or 325-277-3493	
	E	Email: <a href="mailto:srwcdist@verizon.net">srwcdist@verizon.net</a> Fax: 325-884-2445	
C . D'. III	WCD	U 6'- '- L	
		Il finish a request for information w	
		sion of weekends & holidays). In so	
		CD cannot finish the request, we w	III
con	tact the i	requestor. Please print legibly.	
Office Use On	ly		
Date Received:			
Records Available:	YES NO	(Circle One)	
Reason for Non-Avail	ability:		
Date of completion:_			
Employee Signature:			
Follow up needed:	YES NO	Follow up date:	