



Date of Open Record Request: \_\_\_\_\_

**City of Marion, Texas**  
**Public Request for Inspection/Copy of Information**  
**Office of the City Secretary**

The information may or may not be available at the time requested. The City of Marion reserves the right of ten (10) business days to complete the Public Information Request; however, we will strive to accommodate your requests as quickly and as reasonably possible. Public Information refers to information collected, assembled, produced, or maintained in the course of transacting public business. Your request should be for tangible documents or other information that is already in existence. Governmental bodies are **NOT** required to answer questions, perform legal research, or comply with continuing request to supply information on a periodic basis. In some instances, we may require a deposit or pre-payment of anticipated costs.

**Party Requesting Information:**

\_\_\_\_\_  
(Name of Requestor)

\_\_\_\_\_  
(E-mail Address)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City/State/Zip)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Daytime Telephone Number)

**Description of Public Information Requested. Please be as specific as possible.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please select the manner in which you wish to view the requested information:**

- I wish to physically inspect the requested information at City Hall.
- I wish to have copies made of the requested information at the authorized rates.
- I wish to have PDF copies of the requested information e-mailed to the address provided.

**Disposition of Request for Public Records**  
**(FOR OFFICE USE ONLY)**

**Date Received:** \_\_\_\_\_ **Method of Receipt:** \_\_\_\_\_ **Route to:** \_\_\_\_\_

**Date of final action on this request:** \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YYYY)

**Action taken:** \_\_\_\_\_ **Return to the City Secretary's office no later than:** \_\_\_\_\_