



PUBLIC INFORMATION REQUEST

The Office of the City Clerk

P.O. Box 1729 * 118 S. Cage Blvd. * Pharr, Texas 78577

Fax 956-702-5313 or email to hilda.pedraza@pharr-tx.gov and/or imelda.barrera@pharr-tx.gov

This request is made under the Pharr City Charter, Freedom of Information Act and Government Code, Chapter 552, § 552.002, which guarantees public access to certain, non-exempted information in the custody of governmental agencies.

DATE: _____

TIME: _____ AM/PM

PERSON REQUESTING INFORMATION

PRINT NAME: _____

REPRESENTING COMPANY (IF APPLICABLE): _____

ADDRESS: _____ CITY: _____ ZIP CODE: _____

PHONE NO.: _____ CELLULAR PHONE: _____

FAX NO.: _____ E-MAIL: _____

INFORMATION REQUESTED: [_____] COPIES INSPECTION ONLY: [_____]

PLEASE PROVIDE A DETAILED DESCRIPTION OF THE REQUESTED INFORMATION:

In making this request, I understand that the City is under no obligation to create a document, to do legal research, or to answer questions to satisfy my request or to comply with a standing/ongoing request for information. I further understand that copies of the information will be released only in accordance with the Texas Public Information Act, and the City reserves the right to seek an opinion from the Texas Attorney General with regard to the release of said information. If an Attorney General's opinion is sought by the City, you will be notified.

Signature of Requestor

FOR CITY USE ONLY:

Date Received: _____

Due Date: _____

Reference #: _____

Routed To: _____

Department(s): _____

*** Approval must be given by the Department Head and/or City Attorney/City Manager.*

() approved

() denied

() approved

() denied

Department Head

() approved

() denied

City Attorney

City Manager