

## Cityof Downey

11111 Brookshire Avenue, Downey, CA 90241 PH: (562) 904-7280 Fax: (562) 923-6388

Email: cityclerk@downeyca.org

10 DAY:			
14 DAY:			

## REQUEST FOR PUBLIC RECORDS

Please complete this form and submit it to the City Clerk's Office. Upon receipt, the City shall determine within ten (10) days if the records are public and available within the City's records system and will notify the requestor of such determination. (California Public Records Act [G.C. Section 6250-6261]). Fees for records: \$0.60¢ for the first page, \$0.10¢ for each additional page. \$0.10¢ per page for documents requested pursuant to the Political Reform Act, including campaign statements and contribution and expenditure reports. Records maintained digitally by the City, will be provided digitally, free of charge via email. I WISH TO: REVIEW OBTAIN COPIES NUMBER OF COPIES \_\_\_\_\_ Please list each document, or record separately and describe the specific records as completely as possible. Include date range, time, and address, if applicable. IF REQUEST IS FOR MEDICAL INFORMATION, IS MEDICAL RELEASE WAIVER ATTACHED? Attaching legal documentation is required to verify you are the parent, conservator, guardian, executor of a decedent's will, or have medical decision-making authority for the individual. N/A YES **NO** Your request will be delayed until legal documentation is received. Name/Organization Mailing Address E-Mail Address Contact Phone Number Signature Date Records Picked Up: \_\_\_\_\_ Signature of Requestor:\_\_\_\_

FOR INTERNAL USE ONLY								
CITY	CLERK'S OFFICE REVIEW	DEPARTMENT NOTIFICATION	RESPONSE PROVIDED					
Approved	☐ Denied ☐	Department(s):	Date:	Staff Initials:				
If denied,	reason:	Date:	Picked Up:  Mailed:  Faxed:  E-mailed:					
		Staff Initials:	Verbal: □					
			NOTIFICATION (D	PATE/STAFF INITIALS):				
Fee Due:			1 <sup>st</sup> Attempt:					
Approximate			2 <sup>nd</sup> Attempt:					
Staff Time:			3 <sup>rd</sup> Attempt:					
DATE		PROGRESS		STAFF INITIALS				
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