



PUBLIC RECORDS REQUEST FORM

1. PRINT & COMPLETE all information.
2. SUBMIT completed form to: Custodian of Records West Baton Rouge Library, 830 N. Alexander Ave., Port Allen, LA 70767. DO NOT ATTACH PAYMENT TO THIS FORM. WAIT to receive a notice of estimated cost.
3. PAY FEE if applicable. Once you have received a notice of estimated cost, a deposit may be required.

LAST NAME

FIRST NAME

MIDDLE INITIAL

NAME OF ORGANIZATION/COMPANY

MAILING ADDRESS

CITY

STATE

ZIP

TELEPHONE

DATE

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Description of Records Requested (Type or Print): To expedite request, be as specific as possible. You may attach additional pages to the form as necessary. Clearly mark attachments.

Delivery Information—Check appropriate box

- ☐ Make public records available for viewing. The requestor will be notified when records are available for review at the Library. There is NO COST to view the public record.
- ☐ Make copies for pick up by requestor. The requestor must pay for the copies before the copies are released.
- ☐ Place digital copies onto a thumb drive for pick up by requestor. The requestor must pay for the thumb drive before it is released.

Submission of request is certification that requestor understands and accepts obligation to pay applicable fees for copies of records requested and that no copies may be returned for refund.

SIGNATURE OF REQUESTOR: