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CITY OF
Oak Grove
1300 S. Broadway · Oak Grove, Missouri 64075 · (816) 690-3773 · Fax (816) 690-8478

PUBLIC RECORDS REQUEST FORM

City of Oak Grove
City Clerk's Office
1300 S. Broadway
Oak Grove, MO 64075

This is a request for records under the Missouri Sunshine Law, Chapter 610, Revised Statutes of Missouri.

1. I request that you make available to me the following public records.

(Describe the records as specifically as possible. Where you are asking for records that cover only a particular period, such as last year or specific month, identify that time period.)

-OR-

If you know the subject matter of the records, but do not have additional information, use this alternative; I request that you make available to me all records that relate to:

(Be as specific as possible; include dates if you can)

2. I want copies of the above records and will pay for them, rather than just view.

☐ YES ☐ NO

Please send copies to me at the following address:

(Please indicate email address if you desire electronic copy instead of paper copy.)

3. My request serves the public interest and is not just for personal or commercial interest.

☐ YES ☐ NO

I request that all fees for locating and copying the records be waived. The information I obtain through this request will be used to:

(Please explain how and why this information will benefit the public interest.)

4. Please let me know in advance of any search or copying fees.

☐ YES ☐ NO $ 0.00 _____ *(Do not exceed this amount)*

5. If portions of the requested records are closed, please segregate the closed portions and provide me with the rest of the records.

☐ YES ☐ NO

6. Special Instructions or Additional Comments.

_____
Name (Person requesting records)

_____
Address (Send to this address)

_____
Phone Number or E-Mail Address

_____
Date & Time of Request