



FLORESVILLE POLICE DEPARTMENT
 Lorenzo Herrera, Chief of Police

REQUEST FOR PUBLIC INFORMATION

Please use this form to request records from the Floresville Police Department. In accordance with the Texas Public Information Act, the PD will promptly (e.g. within a reasonable time) produce copies of the requested records to you unless the information is exempt from disclosure.

PLEASE FILL IN ALL INFORMATION

NAME: _____ PHONE: _____
 MAILING ADDRESS _____ FAX: _____
 CITY: _____ STATE: _____ ZIP: _____

PLEASE PROVIDE A DETAILED DESCRIPTION OF THE REQUESTED INFORMATION: (e.g. name of record requested, specific date of the record of list, time frame sought, etc.):

In making a request, I understand that the PD is under no obligation to create a document to satisfy my request or to comply with standing/ongoing request information. I further understand that copies of the information will be released only in accordance with the Act, and the PD reserves its right to seek a ruling from the Texas Attorney General with regard to the release of said information. If a ruling is sought by the PD, you will be notified in writing.

Signature/Name of Requestor _____ **Date:** _____

FOR COMPLETION BY CITY ONLY CASE NO. _____
Date received: _____ **Received by:** _____ **Time:** _____
 Assisting Dept: _____ Date records received: _____
 Necessary for review by City Attorney Y N Date sent to City Attorney: _____
 Requires Ruling from Attorney General Y N Date submitted to AG: _____
 Date Records Released (attach a copy of released records to this request): _____
 I have been provided access to the above described record (s).
 Signature of Requestor: _____ Date: _____
 Date of Completion: _____

920 C Street, Floresville, Texas 78114
Office# (830) 393-4055 Fax# (830) 393-3428 Dispatch# (830) 393-2535