

GIDDINGS POLICE DEPARTMENT
179 E. INDUSTRY
GIDDINGS, TX. 78942
Phone: (979)540-2700 Fax: (979)542-1816

OPEN RECORDS REQUEST FORM

Requestor Information

Name: _____

Address: _____

Telephone: (Home) _____ (Cell) _____

(Fax) _____

Date of Request: _____

TO: CUSTODIAN OF RECORDS FOR THE CITY OF GIDDINGS

Pursuant to the Texas Public Information Act, Chapter 552 of the Government Code, I am requesting a copy of certain public records, specifically:

I wish to receive these documents in the manner indicated below:

_____ **MAILED** to me at the address indicated above

_____ **FAXED** to me at the fax number indicated above

_____ **PICKED UP** by me at the Giddings Police Department, 179 E. Industry,
Giddings, TX. 78942

Signature of Requestor

For Office Use

_____ **Requested information released to requesting person**

By _____ Date Released _____

_____ **Information located but unable to release at this time due to**

_____ **No records found**

NOTES: _____
