



CITY OF TWIN OAKS

1381 Big Bend Road • Twin Oaks, MO 63021

(636) 225-7873 • fax (636) 225-6547 • www.cityoftwinoaks.com

REQUEST FOR PUBLIC RECORDS

All requests must be submitted to the City Hall

PLEASE PRINT ALL INFORMATION

Date of Request: _____

Name of Person or Company Requesting Information: _____

Address of Requestor of Information: _____

Daytime Phone: _____ Alternate Phone: _____

Email Address: _____

Description of Records Being Requested (dates, addresses, names, etc.): _____

RESEARCH AND DUPLICATION FEES ALLOWED UNDER STATE LAW ARE AS FOLLOWS:

Clerical Fee* of \$23.00 per hour plus the following Duplication Fees:

- Ten (10) cents per page no larger than 9" x 14".
- Copies larger than 9" x 14" shall include the cost of copies and staff time, which shall not exceed the hourly rate of pay for clerical staff needed for research.
- Fees for maps, blue prints or plats that require special expertise to duplicate shall include national rate of compensation for the trained personnel required to duplicate such documents. If programming is required beyond the customary and usual level to comply with the request for records or information, fees for compliance may include national costs of such program.
- Audio Tapes: \$5.00 each.
- CDs: \$5.00 each.

*If research time is required by managerial staff, fees will include the hourly rate of said staff.

I, the undersigned and requester of this information, understand the above research fee amounts and agree to proceed with this research request. I further understand that depending on the amount of research and copies requested that I may be required to pay a deposit for research to begin on said request.

Signature _____

Date _____