



PUBLIC RECORDS REQUEST

Request Date: _____

A response to your request will be filled as soon as possible, but **no later than 10 days from the date of request**, unless the response time is extended by the City's written notification to you. If for any reason we are unable to provide the information or the information requested is not available, you will also be notified in writing. (See Government Code Section 6253)

Requesting Party Contact Information:

(company name and contact person)

City _____ State _____ Zip _____
(address)

(email address)

() _____ Fax () _____
(phone/extension number)

Information Requested: Please be as detailed as possible – give dates, names of parties involved, precise location, etc.

Please Mail, Hand Deliver, Fax or Email the **Public Records Request** form to:

City of Fullerton
City Clerk's Office
303 W. Commonwealth Avenue
Fullerton, California 92832-1775
Phone: (714) 738-6350
Fax: (714) 525-8071
CityClerksOffice@cityoffullerton.com