



## City of Livingston Public Information Request

City of Livingston  
200 West Church  
Livingston, Texas 77351  
(936)327-4311

Name of Person  
Requesting Information: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Street Address or Post Office Box)

\_\_\_\_\_  
(City) (State) (Zip Code)

Name of Firm or Company  
Represented (If Applicable): \_\_\_\_\_

Date and Time of Request: \_\_\_\_\_

Description of Public Records Requested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Requestor: \_\_\_\_\_

*If the information is not available at the time requested, if there is a cost associated with production of the information, or if an opinion from the Texas Attorney General is needed as to information that may be exempted from disclosure, the requestor will be notified in writing at the above address.*

*For Completion by City of Livingston:*

Date and Time Received: \_\_\_\_\_

Custodian of Records: \_\_\_\_\_

Name of Person Acting for Custodian of Records: \_\_\_\_\_

Action Taken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPROVAL MUST BE GIVEN BY THE CITY ATTORNEY OR CITY MANAGER BEFORE  
RELEASE OF PUBLIC RECORDS.**

\_\_\_\_\_  
City Manager

\_\_\_\_\_  
City Attorney