**TOWN OF STERLINGTON**

**PUBLIC RECORDS REQUEST FORM**

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MAILING ADDRESS**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CITY**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **STATE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **ZIP CODE**: \_\_\_\_\_\_\_\_\_\_\_\_

**TELEPHONE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **FAX**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**E-MAIL**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Description of records requested. Be as specific as possible. Please use the space provided below. You may attach additional pages to this form if necessary.

**RESPONSE OPTIONS**:

**View Records\_\_\_\_\_\_**

The requestor will be notified when the records are available for review. There is no cost to the requestor to view the records during regular business hours.

**Obtain Copy \_\_\_\_\_\_**

A letter providing reproduction option (physical or electronic) and costs will be provided to the requestor once the documents have been collected, reviewed, redacted (if necessary) and page numbered.

Please submit all public records requests by using one of the following:

Attn: Custodian of Public Records, Town Clerk, Natalie Penrose

Email: [npenrose@townofsterlington.com](mailto:npenrose@townofsterlington.com)

Fax: 318-665-2841

Mail: Town of Sterlington

Attn: Custodian of Public Records, Town Clerk, Natalie Penrose

503 Highway 2

Sterlington, Louisiana 71280