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RECORDS REQUEST FORM

Administrative Assistant

Date Request Received

This is a request for records under the Missouri Sunshine Law, Chapter 610, and Revised Statutes of Missouri.

I understand that for copies 9 x 14 or smaller, the fee is \$0.20 / per page. **NOTE:** Depending on the size and nature of my request for records, I may be charged for research time in accordance with RSMO 610.026.1 and in addition for formats other than paper, I may be charged for the cost of the material used for duplication.

REQUESTED BY:

Signature of Requester

(Name)

(Address)

(Phone)

(E-Mail Address)

I request that you make available to me the following records:

(Describe the records as specifically as possible. Where you are asking for records that cover only a Particular period, such as last year or a specific month, identify that time period.)

If you know the subject matter of the records, but do not have additional information, use this alternative:

I request that you make available to me all records that relate to:

(Be specific as possible; dates if you can.)

If you know the subject matter of the records, but do not have additional information, use this alternative:

I request that you make available to me all records that relate to: