



**CITY OF PORTOLA**  
**OFFICE OF THE CITY CLERK**  
**REQUEST FOR PUBLIC RECORDS**

# \_\_\_\_\_

Year \_\_\_\_\_

Requestor \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Signature \_\_\_\_\_ Need by Date \_\_\_\_\_ Fax # \_\_\_\_\_

Specific description of records requested (list each document or record separately):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\* For City Use Only \*\*\*\*\*

Service requested:  Copying  Inspection  Research  Other \_\_\_\_\_

Request received by:  Phone  Walk-in  Mail  E-mail

Other \_\_\_\_\_

Customer type:  Public  City Employee  Other Government

Routed to: \_\_\_\_\_ Completed by: \_\_\_\_\_ Copy Charge: \_\_\_\_\_

Time to complete: \_\_\_\_\_ Date Provided to Requestor: \_\_\_\_\_