



OPEN RECORDS REQUEST

Dear City of McDonough Custodian of Records,

Pursuant to the Georgia Open Records Act, O.C.G.A. § 50-18-70 *et seq.*, I am formally requesting to inspect or retrieve the following City of McDonough records:

Name of Requester (Please Print): _____

Address of Requester: _____

Phone Number: _____ Email: _____

I understand that the law allows the City three (3) business days to review and respond to my request. Additionally, I understand that this does not necessarily mean the documents will be ready in three (3) business days. I understand that the City may have to redact sections of documents that contain privileged or confidential information protected by the Open Records Act. I understand that the law allows the City to charge administrative and copying fees for the cost to search, retrieve, supervise and/or copy the requested documents. This fee is determined based on the hourly rate of the lowest paid full-time employee with the necessary skill and training to respond to my request, with no charge for the first fifteen (15) minutes of time. The charge for copying letter or legal size documents is \$0.10 per page. I agree to pay all copying and administrative costs associated with fulfilling my open records request at the time the records are provided to me and understand that the City may seek legal remedies if I fail to pay or if my check is returned for insufficient funds.

I may be contacted at the above listed information regarding any questions about my request or to update me about the status of my request.

Sincerely,

Name

Date

***Send your request via email to policeorr@mcdonoughga.org or by mail to:
McDonough Police Department
Records Division
50 Lawrenceville Street
McDonough, GA 30253***