TOWN OF SMITHVILLE, MISSISSIPPI



PUBLIC RECORDS REQUEST FORM

Public Record Requests can be submitted using the contact information below:
In Person: Town Hall, 63443 Highway 25 North, 5mithville, MS 38870
Mail: Town Clerk, P.O. Box 10, 5mithville, MS 38870
Fax: 662-651-5226
E-mail: 105t@tracer0adnet

Requested By: (Pe	rson / Organiz	ation)				
Company:				Date:		
Requestor:				Phone:		
Street Address:				City, State, Zip:		
-mail Address:						
Records Requeste	d:					
Description of records	requested (Be as	specific as po	ssible, attach a	additional pages if necessary)	:	
Preferred format of records (Check all that apply):				Preferred method of delivery (Check all that apply):		
Original (For Visual Inspection Only)				☐ E-mailed		
☐ Electronic Media (CD, DVD)				☐ Mailed		
Paper Copy				☐ Visual Inspection		
"Mississippi Public Record ALLOW UP TO 7 WORKING		TO PROCESS THE	REQUEST.	Requestor Signature		
Response to Public R	ecords Request:	F	OR OFFICIA	L USE ONLY		
Copies of all requeste	ed records provided.					
The Town of Smithvil	0.013475.20		nuested records			
posause:	records requested ar		questeu recorus			
publication (/	Miss Code Ann. § 25-	61-11).				
	Smithville does not p					
the custodiar The Town of Smithvill	of some of the require		l records because			
_	f the records request					
publication (I	Miss Code Ann. § 25-	61-11).				
	Smithville does not p all or some of the rec		e	Fee Paid	Request Completed: Initial / Date	
FEES FOR SERVICES				T Comments:		
DESCRIPTION	RATE	QUANTITY	COST	Comments:		
Photocopies	\$0.25					
Photocopies (color)	\$1.50					
CD/DVD/Digital	\$25.00			-		
Large Format Copy	\$15.00					
Copy / Scanning Time	\$8.00/hour					
Research	\$17.00/hour					
Computer Records	\$55.00/hour					
Postage						
TOTAL CHARGES		-				