

Public Records Request Form Louisiana Revised Statute 44.1

**STEP 1**: **PROVIDE** all information below, please print or type.

**STEP 2**: **SUBMIT** completed form to: Custodian of Records via U.S. Mail or via email at the addresses provided below. Do not send payment at this time.

**STEP 3**: **PAY FEE** if applicable. Wait to receive a notice of estimated cost. Once you have received notice, send payment (check or money order ONLY). Copies will be mailed upon receipt of payment, or copies can be picked up with payment. If 10 (ten) working days pass after notice is sent and payment is not received, you will be required to initiate a new request.

## **REQUESTOR'S INFORMATION**

Name:		Date:	
Organization/Company:			-
Mailing Address:			
City:	State:	ZIP:	
Contact Telephone Number:	Email Address:		

**REQUESTED DOCUMENT(S)** 

(Please be specific as possible; attach additional pages as necessary.)

 $\Box$  I certify that I am of 18 years of age.

Requestor's Signature:	Date:

Mail applications to: 2020 Saint Charles Avenue, New Orleans, Louisiana 70130OREmail to: info@notcf.comOR