OPEN RECORDS REQUEST

City of Mansfield  
1200 E. Broad St.  
Mansfield, TX 76063  
Email: openrecords@mansfieldtexas.gov  
Phone: 817-276-4207  Fax: 817-473-2925

Date Received: ____________________  
Due Date: ____________________  
ORR# ____________________

Forward To: ____________________

By submission of this document, I am requesting the information stated below. I understand that some records may be subject to non-disclosure under the Texas Public Information Act, Government Code Chapter 552, and other laws. I further understand that there is a fee charged per request to cover the cost of reproduction or copying.

Records must currently exist; no compiling or creating of records will be performed.

| IF THIS IS A REQUEST FOR POLICE RECORDS: List the Incident / Report Number (if known), Name of Individuals Involved, Date, Location, and Nature of Incident. Identify your Relation to the Incident. Police Records MUST be picked up in person by the original Requestor. |
| Please Print Clearly and Specifically the Records you are Requesting. |

☐ Please Check Here If You Are Willing To Accept Redacted Records.

| NAME: | ADDRESS: | CITY/STATE/ZIP: |
| PHONE #: | EMAIL: |

SIGNATURE OF REQUESTOR: