

## Town of Urbanna Virginia Freedom of Information Act Optional Request for Records Form

This form is **not required** to make a request for records, but is designed to help both parties document and better understand the details of the request.

Your Name:		
Legal Address:	Mailing Address:	
Email Address:		
Phone Number:		
Description of Requested Records (Be as specific as possible and include the na	ame, types of documents, etc. if known.)	
Dates of Records Being Requested:  From to  How would you like to receive your record  □ Electronic copies (email)	is? (Please check one.)	
□ Electronic copies (thumb drive) □ Paper copies by US Mail □ Paper copies for pick up □ Only to review/inspect in person		
	charges not to exceed its actual cost incurred in assessing, duplicating, supplying the second to the right to request a cost estimate prior to the Town beginning the second check this box.	•
questions about the work of the Town, nor do accordance with the Virginia Freedom of Information (Control of the Control of th	FOIA gives citizens a right to inspect or copy public records; it does not apply to be it require the Town to create a record that does not exist. Records will be related remation Act (FOIA), located in § 2.2-3700 et seq. of the Code of Virginia. If the Tolame and contact information of the possessing agency will be provided when kinds.	eased in Town is no

Town of Urbanna FOIA Officer

Physical Address: 390 Virginia Street, Suite B, Urbanna, VA 23175

Mailing Address: P.O. Box 179, Urbanna, VA 23175

Phone: 804-758-2613 Fax: 804-758-0389 Email: c.branch@urbannava.gov

For Office Use Only		
Date Rec'd:	_	
Date Response Due:	_	
Date of Response:	_	
Response:		