



Webb County Public Information Request Form

If you have questions regarding the Texas Public Information Act, please contact the Office of the Texas Attorney General at toll-free (877) 673-6839 or visit their website at www.oag.state.tx.us

FOR DEPARTMENT USE ONLY

RCVD BY: _____ DATE: _____
CASE NUMBER ASSIGNED: _____ DUE DATE: _____

NOTICE: This form is to be completed by the requestor only. Upon receipt of a request for information, Webb County has ten (10) business days in which to release the information to the requestor, request an extension, or request an open letter ruling from the Texas Attorney General. Please note that charges may apply to your request. Please refer to "Cost of Open Records" for any estimated costs.

Section One: Requestor Information — PLEASE PRINT CLEARLY!

Name: _____ Phone Number: _____

Organization (if applicable): _____

Address: _____

City: _____ State: _____ Zip: _____ E-Mail Address: _____

Section Two: What information are you requesting?

Describe the **exact** information you are requesting. Include any details that may help us locate the information. Please do not ask questions. The County is under no obligation to answer any written questions or create any document in response to an open records request.

Section Three: Confidential Information

Please be advised that confidential information is often included in documents held by Webb County. The County may not be able to release this information. The Texas Public Information Act (codified at Texas Government Code Chapter 552) requires a governmental entity to request an open letter ruling from the Texas Attorney General prior to withholding information that is confidential. The Attorney General's Office has 45 days to respond to a request for an open letter ruling. Please check the box below if you are willing to receive only non-confidential information and expedite this request.

Please send me only non-confidential information. I understand that some records may be redacted to withhold confidential information. This information includes, but is not limited to: all Social Security numbers, driver's license numbers, confidential account information, addresses, telephone numbers, and certain e-mail addresses.

I certify that I am the person listed as requestor:

Signature of Requestor
(Digital form, printed name is considered signature.)

Today's Date: _____

Return form to:
Webb County
Attn: Public Information Office
1110 Washington St, 3rd Floor, Laredo, TX 78040
E-Mail: webbpio@webbcountytx.gov
Fax: (956) 523-5151