CITY OF LAKE OZARK

Request for Public Records

Date of Reques	t: Time of Request:	Time of Request:		
Name:	Phone:	Phone:		
Address:				
my request or to be released in confidentiality Lake Ozark ha	request, I understand that the City is under no obligation comply with a standing for information. I further unaccordance with State and Local statutes. This may by the Lake Ozark City Attorney prior to release. I fust three (3) business days to respond to the request mplete disclosure of information.	derstand that the inf require a determinat irther understand tha	ormation will ion as to the at the City of	
	equire more than approximately 15 minutes, special ent the hourly rate as determined by Resolution 2004-1			
3	Clericalapproximately \$3.00 per quarter hour Supervisoryapproximately \$4.66 per quarter hour Duplicating Cost\$0.10 per page			
deposited with returned to the the requestor	a project, an estimate of charges will be developed by the City of Lake Ozark at the time the request is mad requestor. If funds are exhausted before the project with an estimate of additional costs. This must be roject. All fees must be paid in full before the finished	e. All funds not expe is completed, the Cit deposited with the	ended will be y will contact	
REQUEST (be sp	pecific):			
	LAKE OZ	4RK		
Requestor's Signature: Estimated cost o		f Project:		
DO NOT WRIT	E BELOW THIS LINE – FOR STAFF USE ONLY			
Date	Procedures for Requests		Initial	
	Receipt of request by City Clerk			
	Processing of requested information			
	Release of information by City Clerk			
	Staff Comments:			

Updated: 10/5/2018