



**Records Request Form**

**Date Request Received** \_\_\_\_\_

This is a request for records under the Missouri Sunshine Law, Chapter 610, and Revised Statutes of Missouri.

I understand that for copies 9x14 or smaller the fee is \$0.10/per page. NOTE: Depending on the size and the nature of my request for records I may be charged for research time in accordance with RSMO 610.026.1 and in addition for formats other than paper I may be charged for the cost of material used for duplication.

\_\_\_\_\_  
**Signature of Requestor**

**REQUESTED BY:**

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Phone)

\_\_\_\_\_  
(E-Mail Address)

\_\_\_\_\_ I request that you make available to me the following records:

(Describe the records as specifically as possible. Where you are asking for records that cover only a Particular period, such as last year or a specific month, identify that time period.

**If you know the subject matter of the records, but do not have additional information, use this alternative:**

\_\_\_\_\_ I request that you make available to me all records that relate to:

(Be specific as possible; dates if you can)

**If you want and are willing to pay for copies of the records, rather than just being able to see them:**

\_\_\_\_\_ I request that the records responsive to my request be copies and sent to at the following address: \_\_\_\_\_

**City of Hannibal 320 Broadway, Hannibal, MO 63401  
P 573.221.0111 F 573.221.8191**

[www.hannibal-mo.gov](http://www.hannibal-mo.gov)

**Requests can be submitted to the City Clerks Office  
or by email to [mcogdal@hannibal-mo.gov](mailto:mcogdal@hannibal-mo.gov)**

