

## ALABAMA BOARD OF FUNERAL SERVICES

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## **REQUEST FOR PUBLIC RECORDS**

(To conserve taxpayer provided resources, there are procedures governing the orderly production of public records
Read and complete the REQUEST for PUBLIC RECORDS before submitting this Request.)

NAME OF REQUESTING PARTY:				
MAILING ADDRESS:				
Street or P.O. Box				
City	State		Zip Code	
CONTACT NUMBER #:	E-mail address:			
AGENCY YOU ARE REQUESTING PU	JBLIC RECORDS FROM:			
RECORDS REQUESTED: (Be as speciambiguous, overly broad, or unreaseeks records that do not exist or records may increase the fees records.)	asonable in scope, nor is a pub materials that are not public re to over the administrative of	lic officer obligated to cords. Additionally, e	o respond to a request that xtensive requests for public	
PROPOSED USE OF DOCUMENTS:				
(The Alabama Open Records Act ar a direct, legitimate interest in the interest in the specific records requ	specific document(s) requeste	d. Your statement sh	ould communicate a direct	
By submitting this request, you opublic records pursuant to Alaban		a resident with stand	ding to make a request for	
Signature	 Prin	t Name	Date Signed	
BOARD USE ONLY				
Research: Hour	rs @ \$20.00 per hour	= \$		
Copies: pages @ \$.50 per page		= \$		
Other charges:				
ESTIMATED CHARGES		= \$		
On the day of	, 20, payment rece	eived = \$		
Date placed for delivery:	Method	of delivery:		
Tracking # (if applicable)				
Name of processor				
Signature of processor				