

City of Aberdeen, Mississippi Public Request Form

All records requests are to be directed to: City Clerk Office/Records Manager

125 West Commerce Street

Aberdeen, MS 39730 Fax: (662) 369-3103

Email: mmoore0680@gmail.com

To request information pursuant in the Mississippi Open Records Act (Miss. Code Ann. 25-61-1), please fill out the form below and submit it to the City Clerk's Office. Requests may be mailed, hand delivered, transmitted via facsimile, or emailed. All requests will be answered within the statutory guidelines of the Mississippi Open Records Act.

I. INFORMATION ON INDIVIDUAL MAKING THE REQUEST

1.	Blake Feldman			
	(FULL NAME)		(ORGANIZATION)	
2.	MuckRock News DEF 263 Huntington Ave	PT MR#141268		
	(PERSONAL ADDRES	S)	(BUSINESS ADDR	ESS)
3.	Boston			
	(CITY)		(CITY)	
4.	MA	02115		
	(STATE)	(ZIP CODE)	(STATE)	(ZIP CODE)
5.	617-299-1832			
	(TELEPHONE – PERSONAL)		(TELEPHONE – BUSINESS)	
6.	Are you a member o	f the press?	YesX	No

II. DESCRIPTION OF PUBLIC RECORD REQUESTED

Please describe the public record you wish disclosed, in detail. If known, please include, the date of tge record, subject matter, division, etc. If clarification of the request is needed, the requestor will be contacted at the contact information listed above. If necessary, attach an additional page(s) for description.

III. ACKNOWLEDGEMENT OF COST

I understand a fee may be charged to cover the direct costs of search, review, and reproduction, as prescribed in the fee schedule. I understand such costs must be paid prior to the production of the public record. I understand the costs for searching, reviewing and reproducing the records may exceed initial estimates and I agree to pay additional costs if they exceed the original estimate. Should the request require extensive research or copies, the requester agrees to allow additional time for processing the requested documentation to be mutually agreed upon by the parties. IMPORTANT: THEFT OR ALTERCATION OF STATE RECORDS IS A CRIME PUNISHABLE BY LAW. MISS. CODE ANN. 25-59-23 (1972).

09/11/2023		
(DATE OF REQUEST)	(SIGNATURE)	
	M on behalf of Blake Feldman	
	(PRINT NAME)	
Request granted by:	City Clerk / Deputy Clerk	