

**METROPOLITAN PIER AND EXPOSITION AUTHORITY
REQUEST FOR PUBLIC RECORDS**

Date: _____

Print Name: _____ Phone: _____

ADDRESS: _____

Email: _____

Identify as specifically as possible the document(s) sought. *(Add or reference additional sheets as appropriate.)*

Date(s) of record(s) or document(s):

Do you want copies of the records?* Yes No Contact First

***Note: For large requests, a deposit of 110% of estimated reproduction charges may be required before copies are produced.**

I hereby certify and affirm that the above information is true and correct and that I have read and understand the MPEA policies and procedures governing disclosure of public information, including, but not limited to, my rights to appeal denials and applicable time limits.

Signature of Requester

Office Use Only

Date received: _____

TrackingNo.: _____

Date Response Due: _____ Extension taken? ___ Yes ___ No

Extension Response Due Date _____

Date of Response: _____