



**City of El Centro
Office of the City Clerk
1275 Main Street
El Centro, CA 92243
Phone (760) 337-4515
Fax (760) 337-4564**

You will be informed at the time you make your request the estimated time the record can be provided. There is no charge for viewing records. **In order to assist in identifying the record sought, please complete the information below providing specific information and dates.** If you are requesting records maintained pursuant to the Political Reform Act (campaign statements or statements of economic interests) you are not required to list your name, address or phone number.

If applicable, cost for copies: \$8.00 for first page \$.10 for each additional page

Date of Request: _____ Public Request Internal Request

Requesting Department/Agency: _____

Contact Person _____

Contact Number/Extension : _____ Email: _____

Please note that you will be contacted when the information is available for pickup and/or inspection. All document duplication fees are due and payable in full prior to release of documents and are based on the City's current fee resolution.

Date Needed: _____

DESCRIBE THE SPECIFIC PUBLIC RECORDS REQUESTED:

FOR OFFICE USE ONLY:

Staff Initials: _____ Staff Time Processing Request: _____ Completed On: _____

Fees \$ (if any): _____ Date Requestor Notified: _____

Mailed **Picked Up** **Delivered** **Emailed**

Please submit request to cityclerk@cityofelcentro.org