

\_\_\_\_\_  
Date

Records/City Clerk Division  
City of Santa Maria  
110 E. Cook Street, Rm 3  
Santa Maria, CA 93454

To Whom It May Concern:

Pursuant to the California Public Records Act, Government Code Section 6250 et seq., I hereby request copies of the following City records (please be specific):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

use additional sheet if necessary

I agree to pay any costs involved in reproduction of these documents at \$.25 per page. Please contact me at the address and/or telephone number below when the documents are ready or if you have any questions regarding the documents requested.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Daytime telephone number