

Application for Public Information

ereby made to the custodian of information oth, the following item(s).	n for the City of Willis, Texas to produce for inspecti	ion or duplication, or
Signed:	Date:	
inted Name:		
ldress:		
lephone/Cell Number:		
ll responses shall be provided in writing wi formation.	thin 10 working days of the application to the perso	on requesting
Ulliation.		

By typing your name in the "Signed" box you agree that this is as valid as your signature

Please note: An application must be completed for each item.