INFORMATION REQUEST FORM

All requests must be in writing and sent to: Executive Director, 2000 San Francisco Avenue, Laredo, Texas 78040 Fax: (956) 722-6561 Email: publicinformation@larha.org

	(Please type or print in ink)
Requestor's	Name: Volunteers Serving The Need Date: 1/21/16
Mailing Add	dress, City, State, Zip: Laredo Da 78040
Telephone:	
Description (of Information Sought (please be specific):
Check one:	
	I request paper copies to be given: In Person By Mail By Fax
	I request digital copies sent via email (when available)
	I request digital copies on diskette (when available)
	I request only to inspect (i.e. view) the information at Administration Buildin
	Other (please explain in detail)
Mark Control of the Control	on by LHA official only) ed: 1212010 RFI I.D.#
Disposition:	
•	Provided the following information for viewing:
	Fees Assessed: S Date:
	Provided copies of the following information:
	Fees Assessed: \$ Date:
	Sent to Attorney on:
	AG Opinion requested on:
	AG Opinion # received on:
Notes:	
	al Assigned:(signature
LITA OTHER	at the second se



Housing Authority of the City of Laredo

2000 San Francisco Avenue Laredo, Texas 78040 Telephone 956.722.4521 Fax 956.722.6561

CERTIFICATE OF HAND DELIVERY/RECEIPT

I do hereby certify that I have received the following documents requested from the Laredo Housing Authority.

Fee Cash	Money Order No fee
Requestor-Print Name	Signature Date Time
Mary De la Rosa LHA Representative -Print Name	Signature Date Time

Courtesy Copy