

CITY OF BALATON
DATA REQUEST FORM
Minnesota Government Data Practices

City of Balaton | 134 Third Street | P.O. Box 388 | Balaton, Minnesota | 56115
Phone: (507) 734-4711 | Email: balatonmn@gmail.com | Webpage: balatonmm.com

A. To Be Completed by Requester

REQUESTER NAME (Last, First, MI):	DATE:
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ADDRESS (STREET, CITY, STATE, ZIP CODE):	PHONE NUMBER AND EMAIL ADDRESS:
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DESCRIPTION OF THE INFORMATION REQUESTED: (attach additional sheets in necessary) Please be specific – include dates if applicable, type of information, subject matter, etc.
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I AM REQUESTING ACCESS TO DATA IN THE FOLLOWING WAY (CHECK ALL THAT APPLY):	
<input type="checkbox"/> Inspect Copies at City Hall	<input type="checkbox"/> Fax Copies
<input type="checkbox"/> Paper Copies (To pick up)	<input type="checkbox"/> Email Copies
<input type="checkbox"/> Paper Copies (To be mailed)	<input type="checkbox"/> Other Format, describe:

****Please note that fees may be required to obtain copies.***

SIGNATURE OF REQUESTER:

Please sign and date this form and submit to:
Kimberly Wall, City Clerk/Treasurer
134 Third Street
P.O. Box 388
Balaton, Minnesota 56115