

# Public Information Request Form

## Brady Independent School District

Date: \_\_\_\_\_

Requestor Full Name: \_\_\_\_\_

Organization: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

If available, would you accept an electronic format of the responsive documents?     Yes     No

Detailed Description of your request:

**\*NOTE:** Certain exceptions to disclosure exist under the Texas Open Records Act to protect against the disclosure of confidential or privileged information. If it appears that an exception to disclosure exists, an opinion will be sought from the Office of Attorney General regarding your request.

**You may submit the form by mail, fax, e-mail or in person:**

***Attn: Public Information Request***

Brady Independent School District  
1003 West 11<sup>th</sup> Street  
Brady, Texas 76825

Tel: 325-597-2301

Fax: 325-231-4686

Email [tlawrence@bradyisd.org](mailto:tlawrence@bradyisd.org)