

# PUBLIC RECORDS REQUEST

This form must be filled out before any Public Records Request is accepted by the Parish of Jefferson.  
Requestor must show valid identification and document age.  
(Must be 18 years of age) La. R.S. 44:32(A)

Submit to: PARISH OF JEFFERSON  
East Bank Parish Attorney's Office  
1221 Elmwood Park Boulevard, Suite 701, Jefferson, LA 70123

Email: [publicrecordsrequest@jeffparish.net](mailto:publicrecordsrequest@jeffparish.net)

Fax# (504) 736-6307

**\*YOU MUST ATTACH A COPY OF AN OFFICIAL PICTURE ID SHOWING YOUR DATE OF BIRTH\***

**\*\*\* PLEASE PRINT \*\*\***

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

## CONTACT INFORMATION: (Name & Address of person making the Request)

Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

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

## ADDRESS/LOCATION OF ANY PROPERTY INFORMATION REQUESTS: (one address per form)

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

\_\_\_\_\_

## INFORMATION REQUESTED: (Please be specific)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PERIOD OF TIME THIS INFORMATION WOULD LIKELY EXIST:

**\*\*\*\*\* DO NOT WRITE BELOW THIS LINE: FOR OFFICIAL USE ONLY \*\*\*\*\***

Received By: \_\_\_\_\_

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

Department: \_\_\_\_\_

Total # Copies: \_\_\_\_\_

Date Responded To: \_\_\_\_\_

Other Costs: \$ \_\_\_\_\_

Total Cost: \$ \_\_\_\_\_ (ALL COSTS MUST BE PAID PRIOR TO RELEASE)

Ready for Pickup at East Bank Parish Attorney's Office

NO RECORDS / INFORMATION FOUND