



City of Le Sueur, MN
Data Request Form

The undersigned hereby makes an information data request in accordance with Minnesota State Statute, Chapter 13, Government Data Practices Act. According to Minnesota Statute 13.05, Subdivision 12, persons are not required to identify themselves or state a reason for or justify a public data request.
 Remit completed forms to: ldhaene@cityoflesueur.com.

REQUESTOR INFORMATION	
Requestor Name:	Date of Request
Street Address:	City:
State:	Zip Code:
Phone:	Email:

INFORMATION REQUESTED	
1.	2.
3.	4.

 Signature of Requestor

 Date

OFFICE USE ONLY	
Department Name:	Handled By:
Information Classification (Public, Non-Public, Private, Protected Non-Public, Confidential):	
Remarks or Basis for Denial (including Statute Section):	
Copy Charges (if applicable):	Employee Time (if applicable):
Other Charges (if applicable):	Total Amount Due (if applicable):
Data Request Delivery Method (email, fax, mail, personal pick-up):	
Date Received:	Clerk Signature: