OPEN RECORDS REQUEST
INSTRUCTIONS

501 Washington Avenue
Post Office Box 300152
Montgomery, Alabama 36130-0152

In an effort to more efficiently process open records requests, the Office of the Attorney General has established the following procedure for requesting open (public) records.

1. Please complete and sign the attached form.

2. You may attach additional pages if necessary.

3. Please mail your request to:
   Office of the Attorney General
   Attn: Opinions Division
   501 Washington Avenue
   P. O. Box 300152
   Montgomery, Alabama 36130-0152

4. TIPS:
   A. Generally, only Alabama citizens are entitled to open records.
   B. Please avoid terms like “related to” or “pertaining to”. These terms are vague and difficult to precisely interpret.
   C. If seeking emails between parties, please provide keywords or specific email addresses. If the exact email address is unknown, please provide the domain as a search term.
   D. Please write legibly or type your request.
   E. Remember to sign your request.

Once your request is received, you will receive a confirmation letter along with additional instructions regarding payment, if required, or any deficiencies in your request.

Should you have any questions or need additional information, please contact the Opinions Division of the Alabama Attorney General’s Office at (334) 242-7300.
OPEN RECORDS REQUEST FORM

501 Washington Avenue
Post Office Box 300152
Montgomery, Alabama 36130-0152

Telephone: (334) 242-7300
www.AlabamaAG.gov

Name and Title of Person Requesting Records: ________________________________

Contact Information for Person Requesting Records:
Business Phone: ___________________ Cell Phone: ________________________
Email Address: _________________________________

Physical Address of Business/Organization/Person: ________________________________

Purpose for Which Information is Requested: ________________________________

Search Terms: ________________________________

Date Range: ________________________________

Specific Documents: ________________________________

Signature and Title of Individual Requesting Records:
________________________________________

Date: ________________________________