



JEFFERSON PARISH DISTRICT ATTORNEY'S OFFICE

Certification for Free or Reduced Copy Fee

Important: Free and reduced copy fees are given only under the circumstances below. IF ONE OF THE ABOVE CIRCUMSTANCES APPLIES TO YOUR REQUEST, PLEASE COMPLETE THIS FORM.

PRINT and COMPLETE ALL information and submit with Public Records Request. Sign, date, and submit to:

I, _____ of _____ ,
(Name) (Organization/Company)

_____, _____ ,
(Address) (City, State, and Zip)

_____, _____ ,
(Telephone Number) (Email Address)

do by certify ONE of the following:

Certification for Free or Reduced Copy Fee (Check One.)

- I am a citizen of the State of Louisiana who is indigent and lacks the means to pay the regular copy fee.
- The use of copies requested will be limited to a public purpose (including but not limited to use in a hearing before any government regulatory commission). I further certify that the information is not to be used for personal or proprietary use. I understand that if in the future, the Office of the Orleans Parish District Attorney's Office determines my use of these documents to be different than represented here, the DA's Office reserves the right to recover the cost of making Public Records available at the normal rate.
- I am an employee of (local, city, parish, state, or federal government) and the records are solely for use by the agency named above, which qualifies for reduced fees.

Signature of Requestor: x	Date (mm/dd/yyyy)
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If you have any questions, please contact us at (504)361- 1020 and refer to your Public Records Request Number.

For Office Use Only		
Approved by: _____	Approval Signature: _____	Date: _____