

**VILLAGE OF FRENCH SETTLEMENT  
PUBLIC RECORDS REQUEST FORM**

<b>Date:</b>
<b>Print Name:</b>
<b>Requestor Information (Please Type or Print):</b> To expedite your request, be as specific as possible.
<b>REQUESTOR SIGNATURE:</b>

Mail completed request form to:  
Custodian of Public Records, Pam Melancon  
Village of French Settlement  
P.O. Box 3  
French Settlement, LA 70733

OR  
Email completed request form to: [frenchsettlement@eatel.net](mailto:frenchsettlement@eatel.net)

OR  
FAX completed request form to: 225-698-3007

<b>Official Use Only</b>
Date Request Received: _____ Date Records Provided to Requestor: _____