

**JACKSON MUNICIPAL AIRPORT AUTHORITY  
PUBLIC RECORDS REQUEST**

Contact Information for Person Making Request:

Name: \_\_\_\_\_  
                    First  Middle  Last

Company or Entity on Whose Behalf Request is Made: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
                            Street or P.O. Box                            City                            State                            Zip Code

Telephone Number: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

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

**IDENTIFICATION OF RECORDS REQUESTED**

Title or Description: \_\_\_\_\_

Date(s): \_\_\_\_\_

I understand by executing below and submitting this request to JMAA that:

1. JMAA has seven (7) working days from receipt of this request to respond. If JMAA cannot respond to my request within seven (7) working days of receipt, JMAA will notify me of the reasons that it cannot respond within seven (7) working days and will have a total of fourteen (14) working days in which to respond to my request.
2. If the Public Records requested contain trade secrets or commercial or financial information supplied to JMAA by a third party, JMAA will notify the third party of this request and give the third party a reasonable opportunity, not to exceed twenty-one (21) working days, to protect disclosure of the requested information through court order.
3. No Public Records will be provided until JMAA has received payment for all costs and expenses of researching, retrieving and reproducing the Public Records.
4. JMAA will not produce or provide copies of any records protected or privileged by applicable law.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date) **Return**

**VIA E-Mail to [Publicrecords@JMAA.COM](mailto:Publicrecords@JMAA.COM) or VIA FAX to (601) 939-3713**

<b>FOR JMAA USE ONLY</b>	
<b>Date Request Received:</b>	_____
<b>Date Notified of Cost:</b>	_____
<b>Cost:</b>	_____
<b>Date Request Filled:</b>	_____
<b>Date Denied:</b>	_____
<b>Reason Denied:</b>	_____