



Denton County  
MHMR Center

## Public Information Request Form

- Items in **red** are required for us to process your request.

**Requesters Full Name:**

Organization (If Applicable):

**Street Address:**

City:

State:

Zip:

**Primary Telephone Number:**

Cell Phone Number:

Fax Number

**Email Address:**

Please provide us with a detailed description of the information you are requesting, and tell us the best way for us to respond to your request.

**NOTE:** *Certain exceptions to disclosure of public information exist under the Texas Public Information Act. If Denton County MHMR Center believes that an exception to disclosure may exist regarding any requested information, it may seek an opinion from the Office of the Attorney General.*