

**City of Lino Lakes
600 Town Center Parkway
Lino Lakes, MN 55014**

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A. To be Completed by Requester

Requester Name (Last, First, M.):	Phone Number:
Street Address:	Fax Number:
City, State, Zip Code:	Email Address:
Signature:	Date of Request:
<i>Note: According to MS § 13.05, subd. 12, persons are not required to identify themselves, or state a reason for, or justify a request for public data.</i>	
Description of the Information Requested:	

B. To be Completed by City Department

[illegible]