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REQUEST FOR COMMISSIONERS' COURT MEETING EXCERPT

DATE OF REQUEST: _____ DATE OF MEETING: _____

ITEM NUMBER: _____ DESCRIPTION OF ITEM: _____

ATTACHMENT / BACKUP NEEDED? (check one) YES _____ NO _____

PERSON REQUESTING EXCERPT: _____

TELEPHONE AND FAX NUMBER: _____

OFFICE USE ONLY

DATE REQUEST WAS RECEIVED: _____ RECEIVED BY: _____

DATE PREPARED: _____ PERSON ISSUING EXCERPT: _____

*****EXCERPT WILL BE READY WITHIN 10 DAYS OF RECEIVING THE REQUEST*****

REQUESTS MUST BE DONE IN PERSON, E-MAIL OR FAX

NO PHONE REQUESTS WILL BE ACCEPTED

NO EXCEPTIONS

FEE: \$5.00 per certification, plus \$1.00 for each page.

EXCERPT RECEIVED BY: _____