## TEXAS GOVERNMENT CODE SECTION 552.138 PUBLIC ACCESS NOTICE FORM

[Note: This form should be completed and signed by a person who seeks to restrict access to personal information under Government Code Section 552.138(f). The person must then notify the licensing governmental body by providing a completed copy of this form to the governmental body.]

| Name of Person Who Chooses to Res   | strict Access: _ | <br> |  |
|-------------------------------------|------------------|------|--|
|                                     |                  |      |  |
| Governmental Body to be Notified: _ |                  | <br> |  |

The Public Information Act allows a person who holds, has previously held, or is an applicant for a license to restrict access to certain information about the person maintained by a licensing governmental body if the person meets certain criteria set forth at law. See Texas Government Code § 552.138(f). Such a person must notify the licensing governmental body, on a form provided by the Office of the Attorney General or the governmental body at issue, that the person meets the criteria set forth in Government Code section 552.138(f)(2)(A) and chooses to restrict public access to the information. The Office of the Attorney General has promulgated this form to satisfy this requirement.

Pursuant to the preceding authority, the above-named governmental body is notified that the above-named person holds, previously held, or is an applicant for a license; meets the criteria under Government Code section 552.138(f)(2)(A); and chooses to restrict access to the following information pursuant to Government Code Section 552.138(f): (Note: select 'YES' to prohibit release)

| RESTRICT PUBLIC ACCESS?       | NO | YES |
|-------------------------------|----|-----|
| Name                          |    |     |
| Home Address                  |    |     |
| Business Address              |    |     |
| Place of Employment           |    |     |
| Telephone Number              |    |     |
| Electronic Mail Address       |    |     |
| Social Security Number        |    |     |
| Date of Birth                 |    |     |
| Driver's License              |    |     |
| State Identification Number   |    |     |
| Passport Number               |    |     |
| Emergency Contact Information |    |     |
| Numeric Identifier            |    |     |

| (Signature) | <br> |  |
|-------------|------|--|
|             |      |  |
| (Date)      |      |  |