



\_\_\_\_\_  
Date

To:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fax: \_\_\_\_\_

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

**Open Records Request**

Pursuant to the Georgia Open Records Act (O.C.G.A. § 50-18-70 et seq.), I am requesting the following records:

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Submitted by:

\_\_\_\_\_

I can be contacted at:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_