

Request for Public Records

Carlos Ortiz

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Name			
Company			
Address			
	Phone:	Fax:	
Email			
Signature			

Indicate desired data format: Paper* CD* Excel PDF Other _____

*There may be a nominal fee for the Paper or CD options

Please give a complete description of what you are requesting:

<p style="text-align: center;">Office Use Only</p> <p>Date received: _____</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>AR # _____</p>	<p>Notes</p> <p style="text-align: right;">Sent <input type="checkbox"/> Date</p>
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Approved by:	Division	Date
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