CITY OF GARY
LAW DEPARTMENT

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NIQUELLE ALLEN WINFREY
Corporation Counsel

REQUEST FOR PUBLIC RECORDS

Pursuant to I.C. 5-14-3-1 `

Name:____ Phone No.:_________________

Mailing Address: ____

Email or Fax: ____

Date of Request:______________________________________

(MUST BE SPECIFIED WITH REASONABLE PARTICULARITY)

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Date or timeframe of Record being requested: ____

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For Law Department use only:

Date Acknowledgement sent:______________________ By:_______________________________

Date record produced or request denied:_____________ By:_______________________________