

OPEN RECORDS ACT REQUEST

Office of the City Clerk

Media General Public

Information Requested: Please state with specificity the nature of your request, the records you seek, and the applicable time frames.

E-MAIL ADDRESS

Purpose of Request: Personal Commercial Public Interest

NAME OF PERSON MAKING REQUEST (Please Print Name)

ADDRESS

CITY STATE ZIP

PHONE FAX

If this is a media request, who are you affiliated with.

SIGNATURE DATE

You will be notified of any applicable fees pursuant to the Oklahoma Open Records Act, 51 O.S. §§ 24A.1 - 24A.30. Do **NOT** send money prior to receiving notification of applicable fees and the exact amount due.

RETURN FORM TO: City of Cherokee
ATTN: Amber Wilhite, City Clerk
112 N. Grand Ave
Cherokee, OK
Phone: (580) 596-3052 Fax (580) 596-2878
Email: Amber.Wilhite@cherokee-ok.us

