

| То: | Date |
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| Fax: | |
| Email: | <u> </u> |
| | Open Records Request |
| Pursuant to the Georgia Oprequesting the following re | pen Records Act (O.C.G.A. § 50-18-70 et seq.), I am ecords: |
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| Submitted by: | |
| I can be contacted at: | |
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