

OFFICE OF THE GARY CITY CLERK
SUZETTE RAGGS – GARY CITY CLERK
◆ ◆ ◆ CIVIL DIVISION ◆ ◆ ◆

COUNCIL INFORMATION REQUEST FORM

LEGISLATION MINUTES AGENDA OTHER

NAME/AGENCY REQUESTING INFORMATION _____

TITLE (If applicable) _____

ADDRESS _____

CONTACT TELEPHONE NUMBER _____

REASON FOR REQUEST _____

DATE _____

(To be completed by Gary City Clerk personnel only)

DATE INFORMATION COMPLETED _____, 2008

DEPUTY CLERK

DATE