## City of Guyton, Georgia

Established 1887

Working Together to Make a Difference

## **City of Guyton Open Records Request**

Date:			
Name of Person Making Reques	st:		
Contact Information:	Phone	Email	
Item/Record Requested:			
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Do you wish to obtain copies o	i the requested if	laterial? yes no	
•	- '	d from disclosure, must be open for y within three (3) business days fro	•
documentation to you by:	•	dertaken to provide the requested By this of the for copying, production and	date, the
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