

**EAST NANTMEAL TOWNSHIP
RECORD REQUEST FORM**

DATE: _____

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

DESCRIPTION OF RECORDS (FOR MORE SPACE CONTINUE ON BACK): _____

INSTRUCTIONS (CIRCLE ONE): PICK-UP MAIL DISK

FAX #: _____ E-MAIL: _____

COMMENTS: _____

SIGNATURE (WHEN REQUEST IS FULFILLED): _____

FOR OFFICE USE ONLY:

COPIES: _____ POSTAGE: _____ DISK/CD: _____ FAX: _____

TOTAL COST: \$ _____

DATE REQUEST FULFILLED: _____

INITIALS OF STAFF MEMBER: _____

DATE INFORMATION:

PICKED UP: _____ FAXED: _____ MAILED: _____ OTHER: _____