

HABEMATOLEL POMO OF UPPER LAKE

~ ~ REQUEST FOR INFORMATION ~ ~

Name: _____

Contact Information:

Phone: _____ Mailing Address: _____

Fax: _____

HOW DO YOU WISH TO RECEIVE THIS INFORMATION (*PLEASE CHECK ONE*)

Please notify me by telephone and I and/or _____ will pick it up from the tribal office; (NAME OF RECIPIENT)

Please fax it to me at the above fax number; or

Please mail it to me at the above address.

Information Requested: _____

Reason for requesting information: _____

Requester's Signature DATE

REQUEST SUBMITTED VIA TELEPHONE

REQUEST SUBMITTED VIA EMAIL

Tribal Administrator DATE

REQUEST APPROVED

REQUEST DENIED

PENDING EXECUTIVE COUNCIL'S APPROVAL

FOR OFFICE USE ONLY

Routed to: _____	Signed Received: _____
	Sign and date
Time Completed: _____	Signed Completed: _____
	Sign and date