

**OKLAHOMA OPEN RECORDS ACT
REQUEST FOR INFORMATION**

DATE: _____

REQUESTED BY: _____

COMPLETE MAILING ADDRESS: _____

PHONE: _____

E-MAIL ADDRESS: _____ **FAX:** _____

INFORMATION REQUESTED: _____

SIGNATURE OF REQUESTER: _____

REQUEST RECEIVED BY: _____

INFORMATION RELEASED BY: _____

PLEASE SEND TO THE FOLLOWING ADDRESS:

**OKLAHOMA DEPARTMENT OF AGRICULTURE, FOOD, AND FORESTRY
OFFICE OF GENERAL COUNSEL
P. O. BOX 528804
OKLAHOMA CITY, OK 73152-8804
FAX: (405) 522-5789**