

City of Charles Town

FOIA Request Form

Date Submitted: _____

Citizen Name: _____

Phone Contact: _____

Request Submitted via: _____ Email _____ Website _____ US Mail _____ Fax _____ In-Person

Records Requested: (Provide as much detail as possible. Use additional sheets as necessary.)

Where/how you want the information provided to you:

_____ US Mail Address: _____

_____ Email: _____

_____ Fax: _____

_____ Inspect Records in person at 101 E. Washington Street, Charles Town, WV 25414

Questions regarding your request can be addressed to Cindy Rezmer, Operations Director, City of Charles Town, crezmer@charlestownwv.us, 304-724-3260.

Internal Use Only

Date Request Received: _____

Date Provided to Citizen: _____

Internal Respondent: _____