



Attach Your Business Card Here

\_\_\_\_\_  
Date

**Department of Procurement**

City of Atlanta  
55 Trinity Avenue, SW, Suite 1900  
Atlanta, Georgia 30303

**Re: Open Records Request**

Your Name: \_\_\_\_\_

Company: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

FC/Bid # and Title: \_\_\_\_\_

Request: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By signing and submitting this request, I understand that the Department of Procurement has three (3) business days to **respond** to this request pursuant to O.C.G.A. § 50-18-72 (the Georgia Open Records Act).

Please return the request via email to [dopopenrecordsrequest@atlantaga.gov](mailto:dopopenrecordsrequest@atlantaga.gov) or fax to (404) 546-2967 to the attention of **DOP Open Records Request Coordinator**.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

The City is authorized to impose upon you a reasonable charge for the research, retrieval, redaction, and other administrative costs of complying with your inquiry, including copying charges of **\$0.10** per standard page and a charge of **\$14.56** per hour for the time you spend reviewing documents, *to begin after the first quarter hour (15 minutes)*.

For Internal Use ONLY:		
Received by:	Date:	
Disposition:		