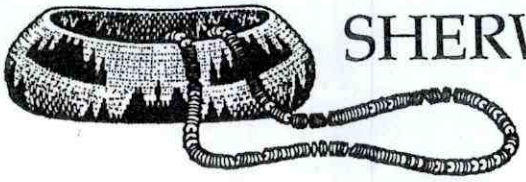

SHERWOOD VALLEY RANCHERIA

TRIBAL ADMINISTRATION
REQUEST FOR DOCUMENTS

Requested by:_____ Date requested:_____

____Tribal Member _____Staff/Dept. _____Other Agency _____Committee Member

If request is from Other Agency or a Committee Member please specify which one:_____

_____

Documents Requested:_____

_____

_____

Purpose for which the documents are being requested:_____

_____

_____

Signature of Requester:_____

Authorizing Signature:_____
Tribal Administrator/Tribal Chairman

Signature:_____
Administration Staff

Date Processed:_____ Provided by:_____
Administration Staff

All Requests have up to a 72 hour processing period.

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