



THE SENECA NATION OF INDIANS

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Pauline John

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REQUEST FOR INFORMATION CLERKS' OFFICE-ALLEGANY TERRITORY

Name: _____ Department: _____

Address: _____

Phone Number:(____) _____ Date needed by: _____

- ✓ No information or copies of deeds will be given unless your name is listed as the land owner (s).
- ✓ For quicker response time, please include as much information as possible regarding your research request. (Names, dates, terms, topic, etc.)

DESCRIPTION OF INFORMATION BEING REQUESTED:

(Office Use Only)

Received by: _____ Date _____

Completed by: _____ Date _____

Notified Recipient on _____ via Telephone/Email/other _____

Comments: _____
