City of Perry, Georgia
Geographic Information Systems
DATA REQUEST AND RELEASE FORM

Name:	
Organization:	
Address:	
City:	**State:**
Zip:	**Phone: ( )**

Product Description	Quantity	Unit Price	Total Price
Grand Total			

Payment is due upon submission of order. If authorization for billing has been previously approved, the undersigned agrees to pay the accompanying invoice upon request. The undersigned hereby waives any liability, as more fully described on the back of this form.

Signature **Date**