

FREEDOM OF INFORMATION LAW REQUEST

New York Freedom of Information Law, Article 6 of the Public Officers Law

All requests must be made in writing

REQUESTOR INFORMATION (Required)

Name:	Name:			Date:		
Mailing Address:		City		State	Zip	
Dorty Vou Donrocont						
Party You Represent:						
Your Firm/Organization Name & Address			Tele	Telephone		
	ernment record sought with suffic		ity to er	nable us t	o ascertain and	
	nclude all known or applicable inf	ormation.				
RECORD INFORMATION Type of Record Sought:						
Type of fledord codgitt.						
Address of Subject Property S			ection/Block/Lot			
Other Descriptive Information of Record Sought:						
Caron Booshpavo amorria	non or nocora Goagni.					
	ge (up to 8.5" x 14") for duplication of this office will respond to your requ		-		knowledgemen	
of receipt and a statement of	the approximate date when such re	quest will be	granted	or denied.	_	
defiled access to records may	appeal to the Board of Trustees wit	nin thirty day	s or a de	eniai		
	DO NOT WRITE BELOV	V LINE				
Records provided:						
Fee paid	Reviewed by			Date:		