

Freedom of Information Request

Town/Village of East Rochester

DATE: _____

TO: Town/Village of East Rochester
Martin G. D'Ambrose
Administrator & Records Access Officer
317 Main Street
East Rochester, New York 14445
F: (585)-419-8282 or email to mdambrose@astrochester.org

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Under the provisions of the New York State Freedom of Information Law ~ FOIL, Article 6 of the Public Officers Law, I hereby request the following records: (please identify specifically the records requested, including months, dates, titles, etc.)

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

The Town/Village will make every attempt to provide the information at the time of the request when possible and appropriate. If unable to provide the information requested immediately, the Village has five (5) business days to respond and must produce disclosable records within another twenty (20) business days from the date of first response as required under FOIL in New York State.

Please be advised – there may be a \$0.25 per copy fee for the records requested. The records are also available for review in person at no cost. If any request is denied as prescribed by law, the denial will be furnished to me in writing.

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

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

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_