

VILLAGE OF CLAYTON
REQUEST FOR RECORDS FORM
(under Freedom of Information Law)

NAME(S): _____
ADDRESS: _____

FOR OFFICE USE ONLY

Date Rec'd: _____
Date Supplied: _____
Date Mailed: _____
Auth. Sig.: _____

Person(s) requesting records should supply the following information: date(s); title(s); file designations, or any other information that will help to find requested records.

Within five (5) business days of the receipt of a written request for a record reasonably described, the agency must make the record available, deny access in writing giving the reasons for denial, or furnish a written acknowledgment of receipt of the request and a statement of the approximate date when the request will be granted or denied.

A fee of \$.25 per page will be required.

If denied, reason for denial:

Signature of Requester

Date