TOWN OF DELAWARE
104 Main Street, PO Box 129
Hortonville, New York 12745
Phone: 845/887-5250 FAX: 845/887-5228

FREEDOM OF INFORMATION LAW (FOIL) REQUEST

TO: Records Access Officer Date: _____

Under the provisions of the New York Freedom of Information Law, Article 6 of the Public Officers Law, I hereby request records or portions thereof pertaining to:

_____

_____

_____

_____

_____

Name: _____
(Please Print)

Signature: _____

Address: _____

_____

Phone: _____

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