

**REQUEST FOR PUBLIC RECORDS  
UNDER FREEDOM OF INFORMATION**

**To: KAREN HUMPHRES  
OFFICE OF THE VILLAGE CLERK  
VILLAGE OF WILLIAMSVILLE**

*I hereby request to inspect the following records (Describe with as much particularity as possible):*

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Please indicate if you wish to inspect the above captioned records or if you would like a copy of them. (Per Ordinance 94-20, copies are \$.25 per page and copy of police reports are \$5.00 each.)

\_\_\_\_\_ **Inspection**                      \_\_\_\_\_ **Copy**                      \_\_\_\_\_ **Both**

*I recognize that fees will be charged for copying and/or certification of records and will pay those fees upon notification thereof and prior to delivery.*

**DATE OF REQUEST** \_\_\_\_\_

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PHONE NUMBER** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

**AMOUNT OF FEES PAID** \_\_\_\_\_

**Office use only**

Received by: \_\_\_\_\_

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

Authorized by: \_\_\_\_\_

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

\_\_\_\_\_

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

**UNLESS OTHERWISE NOTIFIED, YOUR REQUEST FOR PUBLIC RECORDS WILL BE COMPLIED WITH WITHIN SEVEN (7) WORKING DAYS AFTER ITS RECEIPT.**