

FREEDOM OF INFORMATION LAW REQUESTS

Name: _____

Address: _____

Phone: _____

Records Requested: _____

Signature

If request is for a list of names and addresses:

I hereby certify that I will not use the above information for commercial or fund-raising purposes. I further certify that I will not sell, give or otherwise transmit the above information to any person, organization or other entity.

Signature

Request: Approved []

Denied []

Cost: \$ _____

The requested information will be provided to you upon payment of the cost as indicated above and as soon as it can be assembled.

A denial of your request can be appealed to the Chairman of the Cayuga County Legislature.

COUNTY OF CAYUGA

By: _____