

**VILLAGE OF BROOKLYN  
FREEDOM OF INFORMATION REQUEST**

REQUESTED BY: \_\_\_\_\_  
(Please print legibly)

|                                  |
|----------------------------------|
| Date of<br>Request:<br><br>_____ |
|----------------------------------|

Address \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE (\_\_\_\_) \_\_\_\_\_

Description of public records requested:

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Nature of request (check one below):

- \_\_\_\_\_ Please provide a copy of the requested public records.
- \_\_\_\_\_ Please provide a certified copy of the requested public records.
- \_\_\_\_\_ Please allow me an opportunity to inspect the requested public records prior to copying.

Payment (check one below):

- \_\_\_\_\_ I understand that the public body may charge me a fee for providing a copy of a public record, including the cost of copying, mailing, searching, examining, reviewing, separating and deleting exempt information.
- \_\_\_\_\_ Attached is an affidavit of indigence. Please furnish me the requested public records without charge for the first \$20.00 of the required fee.

The Village will respond within 5 business days of this request.  
This form is supplied in accordance with the Freedom of Information Act #442 of 1976.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)