VILLAGE OF BROOKSIDE

PUBLIC RECORDS REQUEST

Method

DATE	
METHOD (In-person, verbal, written, email)	
NAME OF REQUESTOR (Only if voluntarily provided)	
ADDRESS (Required for mail)	
CITY, STATE AND ZIP	
ZIP CODE	
PHONE Optional	
EMAIL (Optional)	
DESCRIPTION OF RECORDS	

DESIRED FORMAT (Paper, electronic, etc.)	
METHOD OF DELIVERY In person or via email, standard mail, electronic media	

RECEIVED BY FISCAL OFFICER, VILLAGE OF BROOKSIDE

DATE _____

SIGNATURE OF FISCAL OFFICER

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