

TO: RECORDS ACCESS OFFICER
Wayne County Board of Supervisors
26 Church Street
Lyons, New York 14489



_____ I HEREBY APPLY TO INSPECT THE FOLLOWING RECORD(S):
_____ I REQUEST COPIES OF THE FOLLOWING RECORD(S):

Signature Title of Agency (if any)

Name (Please print)

Mailing Address

Date

RECORDS ACCESS OFFICER

_____ **APPROVED**

_____ **DENIED** (for the reason(s) checked below)

- _____ Confidential Disclosure
- _____ Part of Investigatory Files
- _____ Unwarranted Invasion of Personal Privacy
- _____ Record of Which this Agency is Legal Custodian Cannot be Found
- _____ Record is not Maintained by this Agency
- _____ Exempted by Statute Other than the Freedom of Information Act
- _____ Other (specify) _____

Signature Title Date

PLEASE ADDRESS ALL FOIL REQUESTS TO:

Wayne County Board of Supervisors
26 Church Street
Lyons, New York 14489
Attn: Sandra J. Sloane, Freedom of Information Officer
(315)946-5400
Fax: (315) 946-5407
SSloane@co.wayne.ny.us