Town of Ellenburg
16 St. Edmund's Way
Ellenburg Center, NY 12934

OFFICIAL OPEN FOIL REQUEST

Record Requested from Office of: (circle options below)

Supervisor Town Clerk Highway Justice Codes/Zoning Assessors

Requested By:

First Name: Lynn Last Name: Paige

Email: Lmarie.paige@gmail.com Phone: 607-846-8896

Organization/Affiliation: NA

Address: 6801 Star Road, Ellenburg Center, NY 12934

Short Title of Requested Records: Sign-in for Grievance Day Hearing May 2024
(Information provided here helps us identify and categorize your request)

FOIL Request/Description of Records Sought:
(Please provide a clear description of the record(s) sought. Personal, private, financial, medical or health-related information should not be put into the description field below and should instead be enclosed with a separate document attached to this request.)

Personal Reasons as a resident and property owner and tax payer in the Town of Ellenburg

I'm requesting the complete sign-in document for the May 2024 Grievance Day Hearings

Requested response format: (circle) Paper Personal Inspection

If fees apply, we will contact you if the cost is greater than: $1.00
(Each paper copy is 25 cents per piece of paper)

Additional Information: (Please check all the apply)

- ✓ I am an individual seeking information for personal use.
- o I am affiliated with an educational or scientific institution and this request is more for scholarly or scientific purposes.
- o I am a representative of, or affiliated with, the news media and this request is made as part of a news gathering effort.
- o I am affiliated with a private corporation and am seeking information for use in the company's business for commercial purposes.

The foregoing information will be used for statistical purposes

Lynn Paige