

You are requested to provide me with the following records: (Please describe fully the records being requested.)

Prior to receipt of such records, I agree to pay the fees required for copies pursuant to the resolution of the Board of Trustees of the Village of Newark Adopted March 21, 1978.

Dated:	Printed Name:
	Signature:
	Address:
	Telephone:
Acknowledged by Village of Newark	Email:
Clerk/Treasurer	
Date:	
Date of delivery of requested records or	
date of decision on availability of records:	Disposition of record availability: Approved Denied
Anticipated date that records will be availabl	e:
Date records delivered:	
Signature of person receiving records:	