

TOWN OF FREETOWN

3 North Main St P O Box 438, Assonet, MA 02702

Jacqueline A. Brown, MMC/CMMC Town Clerk/Master Records Officer

508-644-2201 ext 2

PUBLIC RECORDS REQUEST FORM

| Date of Request: | | | | |
|--|------------------------------|-------------|------|--|
| Description of Materials Sought: | | | | |
| | | | | |
| | | | | |
| REQUESTOR INFORM | | | | |
| Name of Requestor: | | | | |
| Firm / Company: | | | | |
| Address: | | | | |
| City: | | State: | Zip: | |
| Phone number: | | Fax number: | | |
| Email: | | | | |
| Please be as specific as possible when requesting information: COPY OF RECORDS (.05 per page plus search, redact and/or copy fee) | | | | |
| ∟ ОТНІ | ER / ADDITIONAL INFORMATION: | | | |
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MASTER RECORDS OFFICER USE ONLY:

| Date Issued to Custodian: | |
|---------------------------|--|
| Department/Custodian: | |
| Date of Initial Response: | |
| Date of Further Response: | |
| Date Records Provided: | |
| # of Hours to Fulfill: | |
| Total Fees w/breakdown: | |
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| | |
| | |
| | |
| Other: | |
| | |
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| | |
| Amt. Paid/Date: | |