



RECEIVED

OPEN PUBLIC RECORDS ACT REQUEST FORM

818 West Lacey Road, Forked River, NJ 08731

1-609-693-1100, ext. 2200 / Fax: 1-609-693-0526

laceyclerk@laceytownship.org

Veronica Laureigh - Municipal Clerk

LOG# 599

Date Due: 11-5

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requester Information - Please Print

First Name James MI K Last Name LeTellier

E-mail Address jletellier1@comcast

Mailing Address 2521 Smith Rd

City Forked River State NJ Zip 08731

Telephone 609 709 8587 FAX _____

Preferred Delivery: ☒ Pick Up ☐ US Mail ☐ On-Site Inspect ☐ Fax ☐ E-mail _____

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature [Signature] Date 10-29-18

Payment Information

Maximum Authorization Cost \$ _____

Select Payment Method

Cash ☐ Check ☐ Money Order ☐

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) - actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

copy of contract covering period up to +
4-30-2005
though ^ Top of Lacey & SCA Lacey Police

copy of Health coverage for SCA same time
period (4-30-2005)

Thanks

Clerk
~~Admin~~

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____
Filled - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date 10-29
Ready Date _____
Total Pages 46

Final Cost
Total \$2.30
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature

Date

10-31-18