

Albany County Board of Elections

Request for Access to or Copying of Public Records

Complete All of Section A (Please Print or type)

Name _____

Address _____

Phone (____) _____ Email _____

Applying on own behalf? _____

Name and address of person or organization
on whose behalf applicant is acting: _____

Applicant's Signature _____ Date _____

Complete Section B (Please Print or type)

I wish to have copies made of the following documents:

I wish to examine the following documents:

For Board Use Only:

Request Taken by Board Employee: _____ Date _____

Request Fulfilled by: _____ Date _____

Request Approved by (Commissioner or Deputy Commissioner only):

_____ Date _____