## Albert Wisner Public Library Application for Public Access to Records

Records Access Officer: Rosemary Cooper, Library Director

Albert Wisner Public Library One McFarland Drive Warwick, NY 10990

I hereby apply to inspect the following record	rds:	
Name:	Phone:	
Signature:	Date:	
Representing:		
Mailing Address:		
A response to this request will be sent within In accordance with Public Officer's Law, See duplicated text materials. Upon receipt of the	ection 87 (b) (iii), there will be a is fee, duplicated materials will	a fee of <u>25 cents</u> per page for be provided.
Approved: Denied: (for reason(s) checked below)	is Legal Custodian cannot be for his Agency	
Signature:	Title:	Date:
Notice: You have the right to appeal a denia Wisner Public Library, One McFarland Driv denial in writing within ten (10) days of rec	ve, Warwick, NY 10990 who n	
Signature:	Date:	