



BOARD OF SELECTMEN
 TOWN OF GILMANTON
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New Hampshire Freedom of Information Act (FOIA) Request

DATE: _____ TIME: _____ AM / PM

NAME: _____

MAILING ADDRESS: _____

EMAIL: _____ TELEPHONE: _____

Under the **New Hampshire Right to Know Law R.S.A. Ch. 91-A et seq.**, I am requesting an opportunity to inspect or obtain copies of the following public records **[Describe the records or information sought with enough detail for the public agency to respond. Be as specific as your knowledge of the available records will allow. But it is more important to describe the information you are seeking.]**

INFORMATION REQUESTED:

If there are any fees for searching or copying these records, please inform me if the cost will exceed \$_____. This information is not being sought for commercial purposes.

The New Hampshire Right to Know Law requires a response time of five business days. If access to the records I am requesting will take longer than this amount of time, please contact me with information about when I might expect copies or the ability to inspect the requested records.

If you deny any or all of this request, please cite each specific exemption you feel justifies the refusal to release the information and notify me of the appeal procedures available to me under the law.

Thank you for considering my request.

SIGNATURE: _____

DATE/TIME DELIVERED/ PICKED UP: _____