



NASSAU COUNTY BOARD OF ELECTIONS
 400 COUNTY SEAT DRIVE
 MINEOLA, NY 11501-4800

REQUEST FOR CAMPAIGN FINANCIAL DISCLOSURE STATEMENTS

PLEASE NOTE: The New York State Freedom of Information Act provides that the custodial agency may take up to five (5) working days to rule on a Freedom of Information request.

I hereby request to examine the following records: View only Purchase copies

Committee Name _____	Filing Date _____
Committee Name _____	Filing Date _____
Committee Name _____	Filing Date _____
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Committee Name _____	Filing Date _____
Committee Name _____	Filing Date _____
Committee Name _____	Filing Date _____
Committee Name _____	Filing Date _____
Committee Name _____	Filing Date _____

Requesting Party Information (PLEASE COMPLETE ALL INFORMATION BELOW)

Signature _____ Date _____

Reason for Request _____

Name _____

Home Address _____

City _____ State _____ Zip _____

Representing _____

Daytime Phone _____

Business Address _____

City _____ State _____ Zip _____

FOR BOARD USE ONLY

Submitted by: _____

Approved by: _____

Rep Mem. _____

Dem. Mem. _____

Charge Rejected: _____

Date: _____