

## TOWN OF MADISON

OFFICE OF THE TOWN CLERK - TAX COLLECTOR 1923 VILLAGE ROAD **PO BOX 248** MADISON, NH 03849-0248

REQUEST FOR INFORMATION/DOCUMENTS

OFFICE: 603-367-9931 Ext 310/305 FAX: 603-367-4765 or 367-4547 E-MAIL: clerk@madison-nh.org

OFFICE HOURS: M, T, W, TH

8 AM - 4 PM

www.madison-nh.org

NAME:	DATE:
Taxpayer/Busine	ss Affiliation/Citizen:
	View the Town's Finding Aid to be as specific as possible for information being requested
MINUTES:	
MINUTES:	Board/Committee—Date of meeting(s)
==	Board/Committee—Date of meeting(s)
OTHER:	
Please provide AT	LEAST TWO means of contact:
Mailing Address:	
E-mail Address: _	
Telephone #	Cell Phone #
***********	
Most of the inform business hours8 you.	ation held by the Town Clerk is available to review any Monday through Thursday during :00 a.m. to 4:00 p.m. <b>Due to limited staffing, please call ahead to be sure we can assist</b>
Document(s) archivalent subject to a research	wed, which is/are not readily available, may take additional time to locate and may be h fee.

I agree to pay the Town of Madison for any photocopying and/or research fees incurred regarding requested

Archival Vault Program\Request for Information by Public 12.14.2016

Michael R. Brooks Town Clerk/Tax Collector

Signature:

information.

Beckie Bonner Certified Collection Clerk