TOWN OF GRAFTON, NY BOARD OF ETHICS Request for Advisory Opinion

All requests must be submitted in writing to:

Board of Ethics Town of Grafton, NY c/o Town Clerk 2379 Rte. 2 or PO Box G Grafton, NY 12082

Requester's Name:		
Position: (Officer/Off	icial, employee, resident):	
	(Home and email addresses, Phone #):	
Description of Reques	st: (Please provide a detailed description of s and/or circumstances associated with the	the reason for your request including
		
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Requester's signature:		
Rev. 4.10.21	Rec'd/BoE: Name:	Date: