

## Standard Right-to-Know Law Request Form

Good communication is vital in the RTKL process. Complete this form thoroughly and retain a copy; it is required should an appeal be necessary. You have 15 business days to appeal after a request is denied or deemed denied.

SUBMITTED TO AGEN	ICY NAME:				(Attn:	AORO)
Date of Request: Person		Submitted via:	□ Email	□ U.S. Mail	□ Fax	□ In
PERSON MAKING REC	QUEST:					
Name:	me: Company (if applicable):					
Mailing Address:						
City:	State:	Zip: E	Email:			
Telephone:		Fax: _				
How do you prefer to b	e contacted if the	agency has questions?	□ Telepho	ne 🗆 Email 🗆	l U.S. Mail	
matter, time frame, and	type of record or po s. Requesters are no	ncise. Provide as much sp arty names. Use additiond t required to explain why	al sheets if ne	ecessary. RTKL re	equests show	uld seek
DO YOU WANT COPIE	S? 🗆 Yes, electro	onic copies preferred if	available			
	•	ed copies preferred	l C	(		3
Do you want certified o	•	son inspection of record ay be subject to addition	-		opies later	J
•	•	prepayment of fees. S	-		<u>chedule</u> fo	r more
	es associated wit	th this request will be	more than	□ \$100 (or) □	] \$	<b>.</b>
	ITEMS BELC	OW THIS LINE FOR AG	ENCY USE C	NLY		
Tracking:	Date Receive	ed: Re	esponse Due	(5 bus. days):		
30-Day Ext.? □ Yes □	No (If Yes, Final D	Oue Date:	) Actual F	desponse Date: .		
Request was: ☐ Grant	ed 🗆 Partially G	ranted & Denied 🛚 De	nied Cost t	o Requester: \$_		
☐ Appropriate third p	arties notified and	d given an opportunity t	to object to 1	the release of re	equested r	ecords.