

RIGHT-TO-KNOW LAW ("RTKL") APPEAL OF DENIAL, PARTIAL DENIAL, OR DEEMED DENIAL

Office of Open Records ("OOR")

Email: openrecords@pa.gov Fax: (717) 425-5343	555 Walnut Stree Harrisburg, PA	
Today's Date:		
•		
Email:	Phone:	
Request Submitted to Agency	Via: □ Email □ Mail □ Fax □ In-Person (check only one)	
Date of Request:	Date of Response: □ Check if N	No Response
Agency:		
Name & Title of Person Who	Denied Request (if available):	
Address/City/State/Zip:		
	Phone:	
Agency's denial, partial den possession, custody or contro	rom the Agency named above. By submitting this appeal, I am a l, or deemed denial because the requested records are public reof the Agency; the records do not qualify for any exemptions under crivilege, and are not exempt under any Federal or State law or regicific.	cords in the § 708 of the
Please complete the following		
☐ I have attached a copy of	my request for records.	
☐ I have attached a copy of	<u>all</u> responses from the Agency regarding my request.	
•	s or notices extending the Agency's time to respond to my request	•
• • •	the OOR an additional 30 days to issue a final determination.	
the issuance of a final a	ng this issue through OOR mediation. This stays the initial OOR determination by 7 business days. If mediation is unsuccessful, the O of the mediation process to issue a final determination.	