

Standard Right-to-Know Law Request Form

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

SUBMITTED TO AGENCY	' NAME:					(Attn: AORO)
Date of Request:		Submitted via:	□ Email	□ U.S. Mail	☐ Fax	☐ In Person
PERSON MAKING REQUI	EST:					
Name:	Company (if applicable):					
Mailing Address:						
City:	State:	Zip:	Email:			
Telephone:		Fax	:			
How do you prefer to be c	ontacted if the a	agency has questions	s? 🗆 Telep	ohone 🗆 Ema	ail 🗆 U.	S. Mail
RECORDS REQUESTED: matter, time frame, and type are not required to explain w Use additional pages if necess	of record or part hy the records are	ty names. RTKL request	ts should see	k records, not d	ask questi	ons. Requesters
Do you want certified cop RTKL requests may require Please notify me if fees a	☐ Yes, electro ☐ No, in-perso ies? ☐ Yes (ma e payment or pre associated with	onic copies preferred on inspection of reco my be subject to additu epayment of fees. See th this request will b	if available ords preferr ional costs) the <u>Official</u> oe more th	red (<i>may requ</i> No <i>RTKL Fee Sch</i> an \$\Bar{1}\$ \$100 (6)	<u>redule</u> for	r more details.
	ITEMS BELOV	W THIS LINE FOR A	GENCY US	E ONLY		
Tracking:	_ Date Received	d:	Response I	Due (5 bus. da	ys):	
30-Day Ext.? □ Yes □ No	(If Yes, Final Du	ue Date:) Actua	al Response D	ate:	
Request was: \square Granted	☐ Partially Gra	anted & Denied 🛭 🛭	Denied Co	st to Requeste	er: \$	
☐ Appropriate third part	ies notified and	given an opportunit	y to object	to the release	of reque	ested records.