

STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 4-16-15
REQUEST SUBMITTED BY: E-MAIL U.S. MAIL FAX IN-PERSON
REQUEST SUBMITTED TO (Agency name & address): 85 Municipal Road, Hanover, PA 17331
NAME OF REQUESTER : Doug Appler
STREET ADDRESS: 25 Pine Court Drive
CITY/STATE/COUNTY/ZIP(Required): Abbottstown, PA, Adams, 17301
TELEPHONE (Optional): 717-632-2275 EMAIL (optional): drapp125@gmail.com
RECORDS REQUESTED: *Provide as much specific detail as possible so the agency can identify the information. Please use additional sheets if necessary
Copies of all telephone bills related to the office manager cell phone from January 1, 2014 until the present, April 16, 2015. If available in PDF form please use those.
DO YOU WANT COPIES? YES OF NO DO YOU WANT TO INSPECT THE RECORDS? YES OF NO DO YOU WANT CERTIFIED COPIES OF RECORDS? YES OF NO DO YOU WANT TO BE NOTIFIED IN ADVANCE IF THE COST EXCEEDS \$100? YES OF NO ** PLEASE NOTE: RETAIN A COPY OF THIS REQUEST FOR YOUR FILES ** ** IT IS A REQUIRED DOCUMENT IF YOU WOULD NEED TO FILE AN APPEAL **
FOR AGENCY USE ONLY
OPEN-RECORDS OFFICER: Pete Sorks
I have provided notice to appropriate third parties and given them an opportunity to object to this request
DATE RECEIVED BY THE AGENCY: 4-20-15 - Fel. CASH
AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: 4-27-/5
*Public bodies may fill anonymous verbal or written requests. If the requestor wishes to pursue the relief and remedies rovided for in this Act, the request must be in writing. (Section 702.) Written requests need not include an explanation why information is sought or the intended use of the information unless otherwise required by law. (Section 703.)
3/Copies x ,25 = 7,75