pennsylvania

OFFICE OF OPEN RECORDS

STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 2-18-11

REQUEST SUBMITTED BY: ☒ E-MAIL ☐ U.S. MAIL ☐ FAX ☐ IN-PERSON

NAME OF REQUESTER : jim mollick

STREET ADDRESS _____

CITY/STATE/COUNTY/ZIP(Required): _____

TELEPHONE (Optional): _____

RECORDS REQUESTED: **Provide as much specific detail as possible so the agency can identify the information.* ***Please use additional sheets if necessary***

see attached

DO YOU WANT COPIES? YES or NO
DO YOU WANT TO INSPECT THE RECORDS? YES or NO
DO YOU WANT CERTIFIED COPIES OF RECORDS? YES or 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

RIGHT TO KNOW OFFICER:

DATE RECEIVED BY THE AGENCY:

AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE:

***Public bodies may fill anonymous verbal or written requests. If the requestor wishes to pursue the relief and remedies provided 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.)*

From: "jim"
Date: Fri, 18 Feb 2011 14:14:15 -0500
To: <manager@worcestertwp.com>
Cc: <ekriebel@worcestertwp.com>
Subject: rtk

I would like,

Client billing summaries received January 2010 – December 2010 from Township Solicitors Office.

A complete and exact copy of the Township's response to David Brook's RTK request of January 19, 2011 (file no. 11-423) and all responsive documents produced by the Township in response to that request.

Please scan and send docs via email.

Jim Mollick