RTK Number: _____-_____

pennsylvania

OFFICE OF OPEN RECORDS

WORCESTER TOWNSHIP, MONTGOMERY COUNTY

STANDARD RIGHT-TO-KNOW REQUEST FORM

DATA REQUESTED: _May 9, 2014_____

REQUEST SUBMITED BY: □X E-MAIL □ U.S. MAIL □ FAX □ IN-PERSON

NAME OF REQUESTOR: _Wini Hayes_____

REQUESTOR STREET ADDRESS: _____

REQUESTOR CITY/STATE/COUNTY (Required): _____

REQUESTOR TELEPHONE (Optional): _____

REQUESTOR E-MAIL ADDRESS (Optional): _____

RECORDS REQUESTED:

Provide **as much specific detail as possible so the agency can identify the information.*

All monthly client summary pages of legal bills for 2009, 2010, 2011, 2012, 2013, and available monthly summary pages for 2014.

DO YOU WANT COPIES? *YES* or NO (electronic versions if available)

DO YOU WANT TO INSPECT THE RECORDS? YES or *NO*

DO YOU WANT CERTIFIED COPIES OF RECORDS? YES or *NO*

RIGHT TO KNOW OFFICER: TOWNSHIP MANAGER OR ASSISTANT MANAGER

DATE RECEIVED BY THE AGENCY:

AGENCY FIVE (5)-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.)*