

## Borough of North East

31 West Main Street North East, PA 16428 Phone: 814-725-8611 Fax: 814-725-4996

## RIGHT TO KNOW REQUEST FORM

DATE REQUESTED:				
REQUEST SUBMITTED BY:	E-MAIL	U.S.MAIL	FAX	IN-PERSON
Name of Requestor:				
Street Address:				
City/State/County (Required):				
Telephone (Optional):				
Records Requested (Provide as much	n specific detail	as possible so the	Borough can ide	entify the information):
Do you want copies?		Yes /	No	
Do you want to inspect the recor	rds?	Yes /	No	
Do you want certified copies of r	ecords?	Yes /	No	
For Office Use Only:				
RIGHT TO KNOW OFFICER:  DATE RECEIVED BY THE BOROUGH:  BOROUGH FIVE (5)-DAY RESPONSE D  DATE REQUEST FULFILLED:  TOTAL COST:		Rogers, Borou	ıgh Manager	