## **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.

SUBMITTI	ED TO AGENCY NAME:		(Attn: AORO)
Date of Rec	quest:	Submitted via: 🛘 Ema	ail 🗆 U.S. Mail 🗆 Fax 🗀 In Person
PERSON M	AKING REQUEST:		
Name:	Company (if applicable):		
Mailing Ad	dress:		
City:	State:	Zip: Email:	
Telephone	:	Fax:	
How do yo	u prefer to be contacted if the	agency has questions? $\Box$ Te	elephone 🗆 Email 🗀 U.S. Mail
matter, time are not requ	e frame, and type of record or par ired to explain why the records an	rty names. RTKL requests should	detail as possible, ideally including subject seek records, not ask questions. Requesters ne records unless otherwise required by law.
DO YOU W	·	onic copies preferred if availa	ble
	nt certified copies? $\square$ Yes (m	ay be subject to additional cos	Ferred (may request copies later)  its) □ No  ital RTKL Fee Schedule for more details.
	ify me if fees associated wit		
	Address	Phone & Fax	Email & Web
0	195 Drive In Lane Everett PA 15537	814-623-9129 1-800-323-9997 814-623-1444	info@ccaofpa.org www.ccaofpa.org

This institution is an equal opportunity provider and employer.

ITEMS BELOW THIS LINE FOR AGENCY USE ONLY					
Tracking:	Date Received:	Response Due (5 bus. days):			
30-Day Ext.? ☐ Yes	☐ No (If Yes, Final Due Date:	) Actual Response Date:			
Request was: ☐ Granted ☐ Partially Granted & Denied ☐ Denied Cost to Requester: \$					
☐ Appropriate third	d parties notified and given an oppor	tunity to object to the release of requested records.			
NOTE: In most cases, a completed RTKL request form is a public record.  More information about the RTKL is available at <a href="https://www.openrecords.pa.gov">https://www.openrecords.pa.gov</a>					
Form updated Feb. 3, 202	20				

Address



**Phone & Fax** 



Email & Web

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