



STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 6/16/19

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

NAME OF REQUESTER : Mezzacappa _____

STREET ADDRESS : _____

CITY/STATE/COUNTY/ZIP(Required): West Easton, PA _____

TELEPHONE (Optional): _____

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

1. Any document or communication, memo, email or text sent or received in 2016-2018 from/ to Dan DePaul and William Bogari, or other council members , which discusses the change in the fire department donation from 10K in previous years to 50-60K in 2019

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.)*