



STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 7/19/19

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

REQUEST SUBMITTED TO (Agency name & address): Borough of West Easton

NAME OF REQUESTER: Matthew Dees

STREET ADDRESS: _____

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

TELEPHONE (Optional): _____ EMAIL (optional): _____

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

1. Copies of Depositions taken in 2016 regarding any lawsuit against the Borough that is now concluded. (ELECTRONIC) *thumb drive (provided)*
2. THE 2012 VIDEO OF THE RESIDENT CITED FOR DISORDERLY CONDUCT (ELECTRONIC) *thumb drive (provided)*
3. Any Resolution and associated email submitted by a resident in 2016. *paper*
4. APRIL 2016 EMAILS FROM A RESIDENT CLAIMING I AM A LIABILITY TO THE BOROUGH (PAPER COPY) *paper*
- 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
- (PAPER COPY)*

**** 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: Joan Heebner

DATE RECEIVED BY THE AGENCY: 7-19-19

AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: 7-26-19

****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.)**