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STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 3/2/2020	-
REQUEST SUBMITTED BY: E-MAIL U.S. MAIL FAX IN-PERSON	
NAME OF REQUESTER : West Easton Borough Constable	
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 I would like to inspect all general and sewer fund deposits for the 2019 year, the deposit slips, the corresponding bank statements, and any financial records that are generated to record the department reports, journal entires, cash receipts, etc). no copies, inspection only.	ne
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: <u>RETAIN A COPY</u> 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: 3-3-2000	

AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: 3-10-2020

^{**}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.)