



STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 3/4/2019	9				
REQUEST SUBMITTED BY:	OE-MAIL	Ou.s. MAIL	● FAX	OIN-PERSON	
NAME OF REQUESTER : Wes	t Easton Borou	gh Constable .			
STREET ADDRESS :					
CITY/STATE/COUNTY/ZIP(Required): West Easton, PA					
TELEPHONE (Optional):					
RECORDS REQUESTED: *Pro Please use additional sheets		cific detail as possible	so the agency	can identify the Inform	ation.
1. I am seeking electronic co	pies of a YTD	2019 and YTD 20	20 financial	document which sh	ow

expenses paid to both Solicitor Goudszouzian and Barry Isset and Assoc, which were provided in electronic medium in a prior 2019 request for a different time frame. Do not incur fees. I prefer email copies but will accept a fax

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: Joan

DATE RECEIVED BY THE AGENCY: 3-4-2020

AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: 3-11-2020

^{**}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.)