



STANDARD RIGHT-TO-KNOW REQUEST FORM

DATE REQUESTED: 6/16/2020

REQUEST SUBMITTED BY:	E-MAIL	U.S. MAIL	FAX	OIN-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				
1. I am seeking the surveillance video of myself at Borough Hall in August of 2012 regarding a Final Determination granted in my favor. Please remit in email or whatever medium it exists. 2. The video was also posted this year at www.westeastonpa.com, therefore I am seeking all Borough records pertaining to this incident . Electronic copies (fax or email).				
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 **				
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RIGHT TO KNOW OFFICER: \int_{0}	an Heel	bner		
DATE RECEIVED BY THE AGENC				
AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: 4-23-2020				
"urgent" request- yelli	w phas	e Dandemic		

^{**}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.)