E-mail: RTKofficer@commonwealthu.edu

Standard Right-to-Know Law Request Form

Please read carefully. Complete this form and retain a copy of **both** pages; this copy may be required if an appeal is filed. You have 15 business days to appeal after a request is denied or deemed denied. More information about the RTKL is available at https://www.openrecords.pa.gov. In most cases, a completed RTKL request form is a public record.

SUBMITTED TO AGENCY NAME: _____

(Attn: AORO)

Date Request Submitted:		Submit	ted via: □ Email □ U.S. Mail □ Fax □ In Person
PERSON MAKING REQUEST:			
Full Name:			
Company (if applicable):			
Email:			
City:	State:	Zip:	Telephone:
You are required to provide a	nailing ado	dress to the a	agency. (See Section 703 of the RTKL)
Please send response via: □ I	Email □ U.S.	Mail	
and that I am a legal resider <u>may result in the denial of n</u>	nt of the Un	ited States.	nd contact information is true and correct, I understand that failure to check this box nissal of any appeal filed with the Office of
<u>Open Records.</u>			

RECORDS REQUESTED: Provide as much detail as possible, including subject matter, time frame, and type of

record sought. RTKL requests must seek records, not ask questions. Use additional pages if necessary.

Form continues on page 2. Retain a copy of both pages.

RECORDS REQUESTED (continued):			
DO VOLLMANTE CODIECO — V — V — I — V — I — V — V — V			
DO YOU WANT COPIES? Yes, printed Yes, electronic No, in-person inspection			
Records shall be provided in the medium requested if they exist in that medium; otherwise, they shall be provided in the medium in which they exist. See Section 701. Your request may require payment of prepayment of fees. View the <u>Official RTKL Fee Schedule</u> for more details.			
I understand that my request may incur fees. Notify me before further processing if fees will be more than \square \$100 (or) \square \$			
Do you want certified copies? \square Yes (may be subject to additional costs) \square No			
ITEMS BELOW THIS LINE FOR AGENCY USE ONLY			
Tracking: Date Received: Response Due (5 bus. days):			
30-Day Ext.? ☐ Yes ☐ No (If Yes, Final Due Date:) Actual Response Date:			
Request was: \square Granted \square Partially Granted & Denied \square Denied Cost to Requester $\$$			
\square Appropriate third parties notified and given an opportunity to object to the release of requested records			

Retain a copy of <u>both</u> pages of this Form.