



134 North Hoffer Avenue  
Centre Hall, PA 16828  
(814) 364-1772 – Phone  
(814) 364-2821 - Fax

**RIGHT-TO-KNOW REQUEST FORM**

**DATE OF REQUEST:** \_\_\_\_\_

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

**REQUESTED RESPONSE:** E-MAIL U.S. MAIL FAX PICK UP

**NAME OF REQUESTOR (Optional):** \_\_\_\_\_

**STREET ADDRESS (Optional):** \_\_\_\_\_

**CITY/STATE/COUNTY (Required):** \_\_\_\_\_

**TELEPHONE (Optional):** \_\_\_\_\_

**RECORDS REQUESTED\*:**

*\*Provide as much specific detail as possible so the agency can identify the information.*

**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

**For Office Use Only:**

**RIGHT-TO-KNOW OFFICER/APPROVAL:** Mrs. Beth Araujo - \_\_\_\_\_

**DATE RECEIVED BY THE AGENCY:** \_\_\_\_\_

**RESPONSE DUE DATE:** \_\_\_\_\_

**Notes:**