



**MUHLENBERG TOWNSHIP**

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**RIGHT-TO-KNOW REQUEST FORM**

DATE REQUESTED \_\_\_\_\_

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

NAME OF REQUESTOR: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

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

EMAIL ADDRESS (Required if info is to be emailed): \_\_\_\_\_

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

PREFERRED METHOD OF CONTACT: \_\_\_\_\_ E-MAIL \_\_\_\_\_ U.S. MAIL \_\_\_\_\_ FAX \_\_\_\_\_ IN-PERSON

RECORDS REQUESTED\*: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

DO YOU WANT TO INSPECT THE RECORDS? \_\_\_\_\_ YES \_\_\_\_\_ NO

DO YOU WANT COPIES? \_\_\_\_\_ YES \_\_\_\_\_ NO

DO YOU WANT CERTIFIED COPIES OF RECORDS? \_\_\_\_\_ YES \_\_\_\_\_ NO

**RIGHT TO KNOW OFFICER(S):**  
Monna Somerday (Police Records) Dawn Cieniewicz (All other Records)

**DATE RECEIVED BY THE AGENCY: AGENCY FIVE (5)-DAY RESPONSE DUE:** \_\_\_\_\_

*\*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.)*