

Standard Right-to-Know Law Request Form

Good communication is vital in the RTKL process. Complete this form thoroughly and retain a copy; it may be required if an appeal is filed. You have 15 business days to appeal after a request is denied or deemed denied.

SUBMITTED TO	AGENCY NAME:	New Hop	e-Solebury School	District			(Attn: AORO)
Date of Request: _	March 24 2021		Submitted via:	🖸 Email	🖸 U.S. Mail	🖸 Fax	🖸 In Person
PERSON MAKING	G REQUEST:						
Name:Amanda k	manda Kole Company (if applicable):						
Mailing Address:	1166 Shannon Ro	d					
City: <u>Newtown</u>	Stat	e:	Zip:	Email:	amandakole22@gmail.com		
Telephone: 609-	613-2761		Fax:				

How do you prefer to be contacted if the agency has questions? 🖸 Telephone 🖻 Email 🖾 U.S. Mail

RECORDS REQUESTED: Be clear and concise. Provide as much specific detail as possible, ideally including subject matter, time frame, and type of record or party names. RTKL requests should seek records, not ask questions. Requesters are not required to explain why the records are sought or the intended use of the records unless otherwise required by law. Use additional pages if necessary.

I am requesting a copy of the school district's 2020-2021 academic year operating budget as well as the agenda and minutes from the most recent school district board meeting. The requested documents will be made available to the general public, and this request is not being made for commercial purposes. In the event that there are fees, I would be grateful if you would inform me of the total charges in advance of fulfilling my request. I would prefer the request filled electronically, by e-mail attachment if available. Thank you in advance for your anticipated cooperation in this matter. I look forward to receiving your response to this request within 5 days.

DO YOU WANT COPIES? ^(D) Yes, printed copies (*default if none are checked*)

• Yes, electronic copies preferred if available

D No, in-person inspection of records preferred (*may request copies later*)

Do you want <u>certified copies</u>? \Box Yes (*may be subject to additional costs*) \boxdot No *RTKL requests may require payment or prepayment of fees. See the <u>Official RTKL Fee Schedule</u> for more details. Please notify me if fees associated with this request will be more than \Box \$100 (or) \boxdot \$<u>5</u>.*

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: C Granted C Partially Granted & Denied C Denied Cost to Requester: \$_____

□ Appropriate third parties notified and given an opportunity to object to the release of requested records.