

Executive Director
Office of Open Records
Commonwealth Keystone Building
400 North Street, 4th Floor
Harrisburg, PA 17120-0225

| Harrisburg, PA 17120-0225 | Today's date: |
|---|--|
| Right to Know Law Appeal - Denial or Pa | rtial Denial by Agency |
| | a Right to Know Law, 65 P.S. §67.101, et seq. I requested The Agency denied or partially denied my denial of my request, under section 1101 of the Right-to-Know in accordance with the Law: |
| Requester's name: | |
| Address/City/State/Zip: | |
| Date of Right to Know request: | Date of Agency Response: |
| Telephone and fax number: | |
| Concise statement of facts (may attach additi | ional pages if necessary) |
| Name and address of Agency: | |
| Name and title of the Agency official who do | enied the request for records: |
| | |
| | serts that the record is a public record – why you believe the al statement that it is public under the Right-to Know Law is necessary) |
| | acy for denial of the request – why you believe the agency's rect: (may attach additional pages if necessary) |
| Respectfully Submitted, | (must be signed) |

 $\underline{Required} \ documents \ to \ include \ with \ this \ \underline{completed} \ appeal \ form-copies \ of \ \underline{original} \ RTK \ request, \ the \ \underline{Agency \ denial}$