

REQUEST FOR PUBLIC DOCUMENTS

Prices for documents are as follows:

Copies	<u>25¢</u> per page
Electronic Transmissions	<u>25¢</u> per page
Fax Transmissions	<u>25¢</u> per page
Postage	Determined by weight

Request submitted by:

Email US Mail Fax In Person

- A. Each request must include name, address, and phone number of the person to receive the district's response.

Name of Requester:	
Address:	
City/State/Zip:	
County:	
Phone:	

- B. Identification of the requested record, in sufficient detail.

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Do you want copies?

YES

NO

Do you want to inspect the records?

YES

NO

C. Medium in which the record is requested.

Please check one:	FOR OFFICE USE ONLY
<input type="radio"/> Pick Up Documents	# of documents _____ X <u>25¢</u> per page = _____
<input type="radio"/> Mail Documents Address: _____ _____	# of documents _____ X <u>25¢</u> per page = _____ + postage _____ = _____
<input type="radio"/> Fax Documents Fax#: _____	# of documents _____ X <u>25¢</u> per page = _____
<input type="radio"/> Electronic Transmission Email: _____	# of documents _____ X <u>25¢</u> per page = _____

Right to Know Officer

Superintendent's Office
 52 Underwood Road, Throop, PA 18512
 Phone: (570) 307-1108
 Fax: (570) 307-1107
 sheehanp@mvsd.us

The Right to Know Officer shall review the request and respond promptly within five (5) business days of receiving the request.

If the District determines that more than five (5) business days are required to respond to the request, in accordance with the exceptions stated in law, notice shall be sent indicating that the request is being reviewed, the reason for review, and a date when the response will be provided.

Requested submitted on: Date: _____	Documents will be available on: Date: _____	Documents submitted to requester on: Date: _____
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 Signature of Requester

 Signature of person preparing documents