

Official use only
(RTK request tracking no.)

Official use only (date of receipt)

Official use only (expiration of 5-
day period)

**Capitol Preservation Committee
Right-To-Know Office
RIGHT-TO-KNOW LAW REQUEST FORM**

***Name of Requester**
(please print) _____
Last First MI

***Signature** _____ **Date:** _____

***Mailing Address**

Street/P. O. Box

***Telephone No.** _____ **Fax No.** _____ **E-mail Address** _____
Optional Optional Optional
City State Zip Code

Please identify each of the documents that is subject to this request. You must identify these documents with sufficient specificity so that we may ascertain whether we have these documents and whether we will release the documents.

Please check all that may apply

- I am requesting a copy of the documents identified above.
- I am requesting physical access to the documents identified above.
- I am requesting certified copies of the documents identified above.
- I am requesting a copy in the following media format: _____

Fee Schedule:

- Photocopying: \$.25 per page
- CD: \$5.00 each
- Certification: \$5.00 / document
- Postage: Actual cost

*** In accordance with Section 702 of the Law, CPC may fulfill verbal, written or anonymous verbal or written requests for access under the Law. If the Requester wishes to pursue the relief and remedies provided for under the Law, however, the request must be in writing. (See, Law, Section 702).**

While a written request may be anonymous, the Law does require that a written request include the name and address to which the agency should address its response. (See Law, Section 703).