

"RIGHT TO KNOW" REQUEST

The public information identified below is requested forthwith, pursuant to New Hampshire RSA 91-A.

INFORMATION REQUESTED FROM:

| |
|----------------------|
| NAME OF PUBLIC BODY |
| STREET AND/OR PO BOX |
| CITY, STATE, ZIP |

NAME OF PERSON MAKING REQUEST:

(PRINT) _____ DATE _____

I WISH ONLY TO INSPECT AT THIS TIME.

IF REQUESTED INFORMATION IS NOT IMMEDIATELY AVAILABLE, I WOULD LIKE TO HAVE IT:

****Please note that requested documents cannot be sent electronically****

sent to me via U.S.P.S. mail to (Postage charges apply): _____

held for me. Call me at _____ and I will pick up.

other: _____

Signature of person making request _____

DESCRIPTION OF INFORMATION REQUESTED:

I HEREBY ATTEST THAT I HAVE RECEIVED A COPY OF THIS PUBLIC INFORMATION REQUEST ON BEHALF OF

THE PUBLIC BODY NAMED ABOVE AT _____ AM or PM ON _____, 20____.

(circle one) (month and day) (year)

Name of person accepting request (PRINT)

Signature of person accepting request

The requested information is NOT AVAILABLE. Reason _____

The information may not be available. We will search and notify you of our results. (attach explanation if necessary)

The information is available, and the cost to reproduce will be \$.50 per 8 1/2 X 11 photocopy; larger documents or records will be charged at the cost to reproduce them.

Name of person responding (PRINT)

Signature of Person Responding

Date of Response