

# "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