

## County of Elk Right-To-Know Request Form

Date Requested:				
Request Submitted via:	Email	U.S. Mail	Fax	In-Person
Name of Requestor:				
Street Address:				
City/State/Zip:				
Telephone Number:				
Email Address:				
The County of Elk charges	25 per page for coni	es (unless stated c	ntherwise h	v a senarate statute)
, , , , , , , , , , , , , , , , , , ,	1 1 0 1	cost of postage.		, <sub>1</sub>
Please Notif	y Me if Fee's Associat	ed with the Reque	st are More	e than
	For Age	ency Use Only		
Date request received:				
Date of response to request:				
Response:				
Responded by:				
Please submit requests to:	Elk County Open l 300 Center P.O. Box Ridgway, P	Street 448		

email: openrecords@countyofelkpa.com fax: 814.776.5379