

# UNION TOWNSHIP PUBLIC RECORDS REQUEST

Date of Request: \_\_\_\_\_

Requestor's Name: \_\_\_\_\_

Requestor's Address: \_\_\_\_\_

Requestor's Phone # \_\_\_\_\_

Records Requested: (Please identify and describe the specific records requested in order for us to provide you the information you are requesting) Use additional space if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that I am a resident of the Commonwealth of Pennsylvania.

\_\_\_\_\_  
Signature of Requestor

Please Submit your request to: Elizabeth Krause, Right-to-Know Officer  
Union Township  
3111 SR 72  
Jonestown, PA 17038  
Phone: 717-865-4039  
Fax: 717-865-0509

\_\_\_\_\_  
For Township Use Only

Request # \_\_\_\_\_ Date Received: \_\_\_\_\_

Action Taken: \_\_\_\_\_ Response Date: \_\_\_\_\_