

STANDARD RIGHT-TO-KNOW REQUEST FORM

| DATE REQUESTED: December 7 | , 2016 | | | | |
|---|----------------------|--|-------------------|------------------------|--|
| REQUEST SUBMITTED BY: | ⊠ E-MAIL | □ U.S. MAIL | □ FAX | □ IN-PERSON | |
| REQUEST SUBMITTED TO (Age | ency name & ado | dress): Philadelphia Polic | ce Department | | |
| | | | | | |
| NAME OF REQUESTER : Curtis V | Waltman | | | | |
| STREET ADDRESS: 411A Highlan | nd Avenue | | | | |
| CITY/STATE/COUNTY/ZIP(Requ | uired):S | omerville, Massachusetts 0 | 2144 | | |
| TELEPHONE (Optional): | | EMAIL (optional): 30401-07350910@requests.muckrock.com | | | |
| RECORDS REQUESTED: *Provious Please use additional sheets if | | detail as possible so the | e agency can idei | ntify the information. | |
| | Plea | se see attached communication. | | | |
| DO YOU WANT COPIES? 🗵 YE | S □ NO | | | | |
| DO YOU WANT TO INSPECT TH | | | | | |
| DO YOU WANT CERTIFIED CO | | | | -0 110 | |
| DO YOU WANT TO BE NOTIFIE | D IN ADVANCE I | F THE COST EXCEE | DS \$100? 🗆 YE | -S □ NO | |
| ** PLEASE NOTE: <u>RETAIN A COPY</u> OF THIS REQUEST FOR YOUR FILES ** ** IT IS A REQUIRED DOCUMENT IF YOU WOULD NEED TO FILE AN APPEAL ** | | | | | |
| | FOR AG | ENCY USE ONLY | | | |
| OPEN-RECORDS OFFICER: | | | | | |
| □ I have provided notice to appro | priate third parties | s and given them an o | pportunity to ob | ject to this request | |
| DATE RECEIVED BY THE AGE | NCY: | | | | |

**Public bodies may fill anonymous verbal or written requests. If the requestor wishes to pursue the relief and remedies provided for in this Act, the request must be in writing. (Section 702.) Written requests need not include an explanation why information is sought or the intended use of the information unless otherwise required by law. (Section 703.)

AGENCY FIVE (5) BUSINESS DAY RESPONSE DUE: