

NEIU 19

Right-To-Know Request Form

TO: _____ Open Records Officer

DATE REQUESTED: _____

REQUEST SUBMITTED BY: E-MAIL U.S. MAIL FAX IN-PERSON

NAME OF REQUESTOR:

STREET
ADDRESS: _____

CITY/STATE/COUNTY
(Required): _____

TELEPHONE
(Optional): _____

ACCESS TO RECORDS REQUESTED:

Provide as much specific detail as possible so the IU can identify the information.

Please mark as appropriate. If not completed, the NEIU will assume request is for inspection.

1. **DO YOU WANT TO INSPECT THE RECORDS?** Yes or No (No fee for access, if granted).
2. **DO YOU WANT PAPER COPIES?** Yes or No (If yes, there may be a copy fee).
3. **DO YOU WANT PAPER COPIES MAILED TO YOU?** Yes or No (If yes, there will be a fee for postage).

RIGHT-TO-KNOW OFFICER: Francine Lucci

To be completed by the NEIU:

DATE RECEIVED BY THE NEIU: _____

FIVE (5) BUSINESS DAY RESPONSE DUE: _____

Public bodies may respond to anonymous verbal or written requests. The NEIU will only respond to 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).