

## TOWNSHIP OF ABINGTON

Thomas Hecker, *President*Matthew Vahey, *Vice President*Richard J. Manfredi, *Township Manager*Jay W. Blumenthal, *Treasurer* 

## STANDARD RIGHT TO KNOW REQUEST FORM

DATE:	REQUEST SUBMITTED BY: _	E-mail	U.S. MailFa	axIn-Person
NAME OF REQUESTOR: _				
SIGNATURE:				
STREET ADDRESS:				
CITY, STATE, ZIP:		_COUNTY: _		
	(all above required)			
TELEPHONE:	E-MA	IL:		
RECORD REQUESTED:				
*Provide as much specific detail	l as possible so the agency can identi	ify the informat	ion. Use additional sh	neets if necessary.
,				
Do you want to inspect the r	record in our office? Yes _	No		
If you want copies, the cost i	is \$.25 per page or the cost of dup	olication. Do y	ou want copies?	YesNo
	OFFICE USE (	ONLY		
OPEN RECORDS OFFICER:			DAY AND TIME STAMP	
C/O Maria Wyrsta,	sistant Township Manager RTK Coordinator			
· · · · · · · · · · · · · · · · · · ·	, Abington, PA 19001			
Email: righttoknow@	<u>@abingtonpa.gov</u>			
Phone: 267-536-1000	Fax: 215-884-8271	L		
		_	Code	Fire Marshal
Date Received:			Police	Administration
Date Response Due:			Wastewater	Finance
Response:			Public Works	Engineering
			— Parks and Recr	0 0
			Tax Office	
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