

LUZERNE COUNTY  
OFFICE OF LAW  
ROMILDA P. CROCAMO, ESQUIRE  
CHIEF COUNTY SOLICITOR



LUZERNE COUNTY  
COUNTY MANAGER  
C. DAVID PEDRI, ESQUIRE

COUNTY of LUZERNE  
P E N N S Y L V A N I A  
ESTABLISHED 1786

April 4, 2017

Kimberly Ratchford  
72 Glen Maura National Blvd., Floor 2  
Moosic, PA 18507  
Email: [ratchfordka@ccbh.com](mailto:ratchfordka@ccbh.com)

RE: RTK Request # 17-44

Dear Ms. Ratchford:

Thank you for writing to Luzerne County with your request for information pursuant to the Pennsylvania Right-To-Know law. Please note that I am now the Opens records Officer for Luzerne County. My email is [Jackie.Carroll@luzernecounty.org](mailto:Jackie.Carroll@luzernecounty.org).

On April 3, 2017, the Luzerne County Office of Law received a request for documents from you described in the attached Right to Know request. Your request is granted.

Attached to this correspondence is the information you requested.

Had your request been denied, you would have a right to appeal this denial of information in writing to Office of Open Records, Commonwealth Keystone building, 400 North Street, 4<sup>th</sup> Floor, Harrisburg, PA 17120.

If you choose to file an appeal for any reason, you must do so within 15 business days of the mailing date of the agency's response. Section 1101. If you have further questions, please contact me. Please be advised this correspondence will serve to close this request with our office as permitted by law.

Very truly yours,

JACQUELINE MUSTO CARROLL, ESQUIRE  
Luzerne County – Open Records Officer  
200 North River Street  
Wilkes-Barre, PA 18711

#17-44

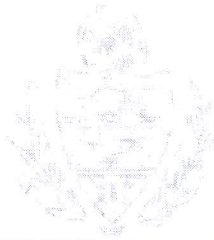
4-3-17

4-10-17

RTK REQUEST NUMBER

DATE RECEIVED

5 DAY RESPONSE DATE



COUNTY OF LUZERNE

17-44 ?

**RIGHT TO KNOW LAW REQUEST FORM**

NAME OF REQUESTER: Ratchford Kimberly A  
(PLEASE PRINT CLEARLY) LAST FIRST MI

MAILING ADDRESS: 72 Glen Maura National Boulevard, Floor 2  
STREET / P.O. BOX  
Moosic PA 18507  
CITY STATE ZIP CODE

PHONE # (570) 496-1328 FAX# 1-866-284-9184

EMAIL ADDRESS: ratchfordka@ccbh.com

SIGNATURE: *Kimberly Ratchford* DATE: March 29, 2017

RECORDS REQUESTED - Requesters MUST specify the document(s) sought. Please use additional pages if necessary.  
As the behavioral/mental health insurer for HealthChoices members in your county, Community Care Behavioral Health Organization respectfully requests the coroner's reports for our members listed below. Information on the cause of death is essential to allow us to properly process this case for closure.

PLEASE CHECK ONE OF THE FOLLOWING:  
 I AM ONLY REQUESTING ACCESS TO THE DOCUMENT(S)  
 I AM REQUESTING A HARD COPY OF THE DOCUMENT(S) (PAPER, CD, etc...)  
 I AM REQUESTING AN E-FILE OF THE DOCUMENT(S) (IF AVAILABLE) (PDF, EXCEL SPRDSHT, etc...)

PLEASE NOTE: LUZERNE COUNTY IS NOT REQUIRED TO CREATE A RECORD WHICH DOES NOT CURRENTLY EXIST OR TO COMPILE, MAINTAIN, FORMAT OR ORGANIZE A RECORD IN A MANNER IN WHICH THE AGENCY DOES NOT CURRENTLY COMPILE, MAINTAIN, FORMAT OR ORGANIZE THE RECORD

