



RIGHT-TO-KNOW REQUEST FORM

DATE SUBMITTED: 5.01.18

REQUEST SUBMITTED BY: E-MAIL

NAME OF REQUESTOR: Chuck Chandler

STREET ADDRESS: 1337 Massachusetts Ave, #124

CITY/STATE/COUNTY (Required): Arlington, MA 02476

TELEPHONE (Optional): 202.744.1980

RECORDS REQUESTED:

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

Please provide any document such as, but not limited to: professional services engagement letter; legal services contract; legal services engagement letter; attorney hourly rate schedule that shows the hourly rates agreed to, approved, and/or budgeted for all attorneys at all private law firms retained, hired, or contracted with to do any legal work for your department, division, section, and / or entity for the year 2018 and subsequent years. It is preferable that the attorneys hired are listed by name and by law firm but if you only have generic titles, "Partners," for example, then we will accept that.

Please email me the appropriate documents to this email address CPRA-Valeo@valeopartners.com or send the hard copy to the address below.

DO YOU WANT COPIES? YES (Email preferred)

DO YOU WANT TO INSPECT THE RECORDS? NO

DO YOU WANT CERTIFIED COPIES OF RECORDS? NO

DO YOU WANT TO BE NOTIFIED IN ADVANCE IF THE COST EXCEEDS \$100?
YES

RIGHT TO KNOW OFFICER: _____



DATE RECEIVED BY AGENCY: _____

AGENCY FIVE (5)-DAY RESPONSE DUE: _____

*FORWARDED TO R-T-K OFFICER BY: _____

(to be filled out by city official who received the request)

****NOTE: PLEASE BRING REQUEST DIRECTLY TO THE CITY'S OPEN RECORDS OFFICE OR FAX IT TO 570-208-4153 (do not place in office mailbox)**

*****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 being sought or the intended use of the information unless otherwise required by law (Section 703.)**