



<b>TO:</b> Andrea Banks Agency Open Records Officer Department of Human Services P.O. Box 2675 Harrisburg, PA 17105-2675	RTKL Request: _____ Date Request Received: _____ Date Response Sent: _____
<b>REQUESTOR:</b> _____ <p style="text-align: center;">Name</p> _____ <p style="text-align: center;">Address</p> _____ <p style="text-align: center;">Address</p> _____ <p style="text-align: center;">Telephone</p> _____ <p style="text-align: center;">Facsimile</p> _____ <p style="text-align: center;">Email</p>	<b>SEND RESPONSE TO:</b> _____ <p style="text-align: center;">Name</p> _____ <p style="text-align: center;">Address</p> _____ <p style="text-align: center;">Address</p> _____ <p style="text-align: center;">Telephone</p> _____ <p style="text-align: center;">Facsimile</p> _____ <p style="text-align: center;">Email</p>

Pursuant to the Pennsylvania Right-to-Know Law, 65 P.S. § 67.101, et seq., I hereby request that the Department of Human Services provide me access to the records identified or described below.	
<b>1</b>	
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Please Note: The Pennsylvania Right-to-Know Law allows the Department of Human Services to charge for the cost of postage, duplication, certification and other costs necessarily incurred to respond to your request.