

PUBLIC RECORDS REQUEST

Please submit all record requests to: Appalachia Intermediate Unit 8
Open Records Office
Attn: Jennifer Anderson
4500 6th Avenue
Altoona, PA 16602

Name of Requestor: _____
(Last) (First) (MI)

Street Address/P.O. Box: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Fax Number: _____
(Optional) (Optional)

Please identify each of the documents that is subject to this request. You must identify these documents with sufficient specificity so that we can ascertain whether we have these documents and how to locate them.

Identify the medium in which you are requesting a copy of the documents above, check one of the following boxes:

I want a paper copy of the documents.

I want an electronic copy of the documents (e.g., email)

Other (please specify): _____