



County of Elk Right-To-Know Request Form

Date Requested: _____

Request Submitted via: Email U.S. Mail Fax In-Person

Name of Requestor: _____

Street Address: _____

City/State/Zip: _____

Telephone Number: _____

Records Requested

Provide as much specific detail as possible so the department can identify the information.
Please be very specific regarding the time frame you are requesting information for.

The County of Elk charges .25 per page for copies, (unless stated otherwise by a separate statute)
plus the actual cost of postage.

For Agency Use Only

Date request received: _____

Date of response to request: _____

Response: _____

Responded by: _____

Please submit requests to:

Jean L. Zore
Open Records Officer
300 Center Street, P.O. Box 448
Ridgway, PA 15853
Phone: 814.776.4607 Fax: 814.776.5379
Email: openrecords@countyofelkpa.com