

**OPEN RECORDS REQUEST FORM**



**Lucy Yakulis, Open Records Officer**  
40 N Pennsylvania Ave  
Courthouse Extension  
Greensburg, PA 15601

**Email: records@co.westmoreland.pa.us**  
**FAX: 724.830.3684**  
**Phone: 724.830.3467**

**REQUEST SUBMITTED BY:**            E-MAIL            U.S. MAIL            FAX            IN-PERSON

**NAME OF REQUESTOR**

**BUSINESS NAME**

**STREET ADDRESS**

**CITY/STATE/ZIP**

**COUNTY (Required)**

**TELEPHONE (Optional)**

**EMAIL ADDRESS**

**RECORDS REQUESTED:** *Provide as much specific detail as possible*

**DO YOU WANT COPIES?**            yes            no

**DO YOU WANT TO INSPECT THE RECORDS?**            yes            no

**DO YOU WANT CERTIFIED COPIES OF RECORDS?**            yes            no

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

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**For Agency Use Only**

**DATE RECEIVED**

**TRACKING#**