



City of Williamsport

Office of City Clerk

245 West Fourth Street

Williamsport PA 17701

Phone: 570 327-7504 Fax: 570 327-7505

Email: cityclerk@cityofwilliamsport.org

Date _____

Request Submitted By: E-MAIL U.S.MAIL FAX IN-PERSON

Name of Requestor _____

Street Address _____

City/State/County (Required) _____

Telephone (Optional) _____

Records Requested

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

Do You Want Copies? Yes No
[Paper copies are \$0.25 per page, other forms at cost. No charge to view/inspect only.]
Do You Want to Inspect the Records? *[No Charge to View]* Yes No
Do You Want Certified Copies of Records? Yes No

SHADED AREA BELOW TO BE FILLED OUT BY OPEN RECORDS OFFICER

Open Records Officer	Janice M. Frank, City Clerk
Date Received by the Agency:	
Agency Five (5) Day Response Due:	
Agency Response Given Date:	