

## Cambridge Ethics Commission Request to Review Ethics Forms

**Request-**

Person to be Reviewed: _____	# of pages	# of pages
Year of document to be Reviewed _____	given	returned
Document(s) to be Reviewed: _____	_____	_____
Date Requested _____		

Name of Requester: _____	<b>Name &amp;Address</b>
Address: Street. _____	<b>Verified: YES - NO</b>
City State Zip Code _____	

Name of City Employee Handling Request: \_\_\_\_\_  
Date Notification Sent: \_\_\_\_\_

**Instructions:**

1. Only one person, one document, and one year can be reviewed at one time.
2. Requester must appear in person and have a valid ID.
3. Original file **cannot** be taken off the premises of the City Clerk’s Office.
4. There is a fine of up to \$50 per page for any missing or destroyed pages. This includes writing on or marking up original documents.
5. Copies can be made of the file at a cost set by the City Clerk to cover costs.
6. **The City employee handling the request must:**
  - a. Verify the name and address from a valid ID and initial this form.
  - b. Count the number of pages given and note the number on this form.
  - c. Arrange for a space for the requester to review the forms.
  - d. Arrange for the copying of the file for a fee, if requested
  - e. Count the number of pages returned and note on this form.

E Notify in writing the person whose file was reviewed providing them with the name and the address of the requester. Attach a copy of the notification to this form.

  - g. Retain this form and notification for 4years.