

Cambridge Ethics Commission
Request to Review Ethics Forms

Person to be Reviewed: _____ # of pages # of pages
given returned

Year of document to be Reviewed: _____

Document(s) to be Reviewed: _____

Date Requested: _____

Name of Requester: _____

Name & Address
Verified: YES - NO

Address: _____
Street, 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. The requester must appear in person and have a valid identification.
3. The original file **shall not** be taken off the premises of City Hall.
4. There is a fine of up to \$50 per page for any missing or destroyed pages, including writing on or marking up original documents.
5. Copies may be made of the file in accordance with any copying fees charged by the City.
6. The requester shall not be provided the home address of the person whose file is to be reviewed. A redacted copy of any page containing such person's home address shall be provided in lieu of the original.
7. **The City employee handling the request shall:**
 - a. Verify the name and address from a valid identification and initial this form;
 - b. Count the number of pages given and note the number on this form;

- c. Arrange for a space at City Hall 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;
- f. 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 four years, or as required by any records retention schedule adopted by the City.