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| APV oreol + tradicionalni grb BLACK-01 | Republic of SerbiaAutonomous Province of Vojvodina**Assembly of the Assembly of the Autonomous Province of Vojvodina****ASSEMBLY SERVICE**Vladike Platona bb, 21000 Novi SadT: +381 21 487 4143 F: +381 21 457 917informacije@skupstinavojvodine.gov.rs |
|  | NO.: | DATE: |

**R E Q U E S T**

**for Access to Information of Public Importance**

 On the basis of Article 15(1) of the Law on Free Access to Information of Public Importance (“Official Gazette of the Republic of Serbia” No. 120/04, 54/2007, 104/2009 and 36/2010), I hereby request that the authority first written above grant me the following\*:

􀀀 notification as to whether it is in possession of the requested information;

􀀀 insight into a document containing the requested information;

􀀀 copy of a document containing the requested information;

􀀀 sending of the a document containing the requested information\*\*:

􀀀 by mail

􀀀 by electronic mail

􀀀 by fax

􀀀 by other means:\*\*\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This request relates to the following information:

(please provide as detailed an account of the requested information as possible, as well as any other data that could facilitate information retrieval)

Done in\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicant / Name and Family Name

On \_\_\_\_\_\_\_\_\_\_20\_\_\_. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 address

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Other Contact Information

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* Tick the box next to the legal right to access to information that you wish to exercise.

\*\* Tick the box next to the means by which the copy of the document is to be sent.

\*\*\* If you require the copy to be sent by other means, please indicate by which other means.