Request for Government Record

INSTRUCTIONS FOR REQUESTING GOVERNMENT RECORDS

A request for access to a government record shall be in writing and hand-delivered, mailed, transmitted electronically or otherwise conveyed to NJHCFFA using this form. Access to the government record(s) will be granted or denied no later than seven business days after receipt of the request provided that the government record(s) is currently available and not in storage or archived and the record consists of a total of 100 or fewer pages. If the record is in storage or archived or exceeds 100 pages, NJHCFFA will advise the requestor within seven business days of the request as to when the record can be made available. If the record is not made available by that time, access will be deemed denied.

If NJHCFFA asserts that part of a particular record is exempt from public access pursuant to P.L.1963, c.73 (C.47:1A-1 et seq.) as amended and supplemented, NJHCFFA will delete or excise that portion which is exempt and permit access to the remainder of the record. NJHCFFA will indicate the reason for denial in the designated area below and return a copy of the form to you. The requestor may challenge the decision by filing a complaint with the Government Records Council in the Department of Community Affairs or by filing an action in Superior Court.

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Name: Steven DiMatteo **Date:** 8/3/17

Address: PO Box 1118
1113 Black Horse Pike
City, State, Zip: Hammonton NJ 08037

Phone: 609-704-8351
Fax: 609-704-0621
E-mail: sdimatteo@ibew351.org

Provide brief description of requested Government Record: Please provide, in email form if possible, the minutes of the NJHCFFA meetings from January 1, 2016 to present.

Signature of Requestor: SDS **Date:** 8/3/17

TO BE COMPLETED BY NJHCFFA

Government Record to be provided:

Date of Availability:

Copying Cost:
Delivery Charge:

Signature of NJHCFFA Custodian of the Record: **Date:**

TO BE COMPLETED BY NJHCFFA IF REQUEST IS DENIED IN WHOLE OR IN PART

Reason for Denial:

Signature of NJHCFFA Custodian of the Record: **Date:**

P.O. Box 366, Trenton, NJ 08625-0366
609-292-8585 Fax 609-633-7778
info@njhcffa.com

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Name: Mitchell Fagen **Date:** 8/11/2017

Address: Wisniewski & Associates, LLC
17 Main Street
City, State, Zip: Sayreville, NJ 08872

Phone: (732) 651-0040
Fax:
E-mail: mfagen@wisniewskilaw.com

Provide brief description of requested Government Record: Please provide the current version of the unapproved, draft minutes from the July 27, 2017 meeting of the New Jersey Health Care Facilities Financing Authority. Please provide the response to this request through email, sent to: mfagen@wisniewskilaw.com

Signature of Requestor: Mitchell Fagen **Date:** 8/11/2017

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New Jersey Health Care Facilities Financing Authority ("NJHCFFA")
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Name: Zaara Nazir **Date:** 8/22/2017

Address: White and Williams
1037 Raymond Blvd., Suite 230
City, State, Zip: Newark, NJ 07102

Phone: 973-604-5681
Fax: 201-368-7243
E-mail: nazirz@whiteandwilliams.com

Provide brief description of requested Government Record: All financings and applications for financing of Valley Hospital (Valley Health System).

Signature of Requestor: Zaara Nazir **Date:** 8/22/2017

TO BE COMPLETED BY NJHCFFA

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Signature of NJHCFFA Custodian of the Record:

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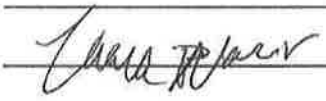
Name: Zaara Nazir **Date:** 8/28/2017

Address: White and Williams
1037 Raymond Blvd., Suite 230 **Phone:** 973-604-5681
City, State, Zip: Newark, NJ 07102 **Fax:** 201-368-7243
E-mail: nazirz@whiteandwilliams.com

Provide brief description of requested Government Record: All loan documents for Valley Hospital (Valley Health System) for the past 5 years related to Valley Hospital's plan to build a hospital on Winters Avenue in Paramus, New Jersey.

Signature of Requestor:  **Date:** 8-28-17

TO BE COMPLETED BY NJHCFFA

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Name: Michael McBride **Date:** 11/16/2017

Address: 101 Eisenhower Parkway, Roseland, NJ 07068

City, State, Zip:

Phone: 973-403-3141
Fax: 973-618-5529
E-mail: mmcbride@bracheichler.com

Provide brief description of requested Government Record: I am making this OPRA request to the NJHCFFA in regards to the utilization of the Delegated Purchasing Authority (DPA) and the Procurement Card (PCard) for purchasing items from the company Action Office Supplies, Inc. This requests seeks invoices, purchase orders and correspondence with Action Office for the time period of January 1, 2013- December 31,2015. Please feel free to email or call with any questions. Thank you.

Signature of Requestor: Michael McBride **Date:** 11/16/2017

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