

SCHEDULE 2

FORMS

THE ACCESS TO INFORMATION ACT, 2005
THE ACCESS TO INFORMATION REGULATIONS, 2011
REQUEST FORM

(Please use a separate request form for each document requested)

1. Name of public body

(Please state the title of the institution from which you are requesting access to a record)

HOTEL AFRICANA, KAMPALA

2. Name of requester

EDWARD RONALD SEKYEWA
HUB FOR INVESTIGATIVE MEDIA (H. I. M).

3. Particulars of requester

(Please indicate the address to which correspondence related to your request should be sent)

Postal Address

P. O Box 29285 KAMPALA

Physical address

BOMBO ROAD, KAMPALA

Plot No.

28/30

Street

BOMBO ROAD

Town/City

KAMPALA

Telephone No.

0775- 18 55 98

Fax No.

Email address:

edwardronalds16@gmail.com

Other:

Received

4. Description of record
(Please state all the information available to you which will assist in processing your request)

Name/Type of document
(If known)

GOVERNMENT - SPONSORED EVENTS HELD AT
HOTEL AFRICANA BETWEEN OCTOBER 2012 - APRIL 2013

Reference/File No.
(If known)

5. Contents of document
(Give brief description)

A LIST OF ALL CONFERENCES, DIALOGUES AND OTHER
EVENTS THAT HAVE BEEN SPONSORED BY THE GOVERNMENT
OF UGANDA, STATE BODIES AND STATE AGENCIES, THAT
HAVE BEEN HELD IN THIS HOTEL WITHIN THE
PERIOD FROM OCTOBER 2012 TO APRIL 2013.

6. Other
(Please state any other details that may be relevant to the processing of the request)


THE DOCUMENT SHOULD INDICATE WHICH STATE BODY
OR AGENCY HELD AN EVENT AT WHICH DATE, AND
HOW MUCH WAS PAID FOR THAT PARTICULAR EVENT
TO HOTEL AFRICANA GIVING A BREAK DOWN
OF ITEMS AND COSTS.

7. I would like to:
(Please check the relevant options)

- (a) Inspect the record
- (b) Listen to the record
- (c) View the record
- (d) Have copies made available to me in the following format:-
 - i. Photocopy
 - ii. Compact disc
 - iii. Diskette
 - iv. USB mass drive
 - v. Transcript
 - vi. Other (please specify); and
- (e) Other (please specify)

8 Number of copies required: 1 copy

9 Request on behalf of another person
.....
.....

Signature of requester: 

Date: 2nd MAY 2013