



State of Utah

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DR. MICHELLE HOFMANN
Executive Medical Director

DAVID LITVACK
Deputy Director

NATE WINTERS
Deputy Director

May 7, 2024

Martin Gottesfeld
mgottesfeld@gmail.com

Re: Record Request

Dear Martin

This email is in response to the request you submitted under the Government Records Management Act ("GRAMA") received by the Division of Licensing & Background Checks ("DLBC") on April 16, 2024, wherein you requested "all public records regarding the RAFA Academy's licensing application and any determinations made as a result thereof, to include the application itself, the division's communications and records as to the application or license, any determination of whether to grant a license and all records relating to any appeal or appeals of the department's determination or determinations."

In the records that are being produced, you will note that some information has been redacted. Information that has been redacted includes personal emails and phone numbers. This information is classified as private pursuant to 63G-2-302(2)(d). Your request related to this information is denied because, pursuant to Utah Code section 63G-2-202, your request does not show that you are entitled to receive records that are classified as private, protected, or controlled.

DLBC reserves the statutory right to redesignate a record, or information within a record at any time, pursuant to Utah Code Ann. Secs. 63G-2-307. We would also like to remind you that, should any private, controlled, or protected information have been accidentally disseminated by DLBC, further dissemination of that information could result in a class B misdemeanor against you, pursuant to Utah Code Ann. Secs. 63G-2-801(1)(a).

You have the right to appeal this decision to:
Chief Administrative Officer
Utah Department of Health & Human Services
195 North 1950 West
Salt Lake City, Utah 84103

To do so, you must file a Notice of Appeal with the above-named officer within thirty (30) days of the date of this letter. Your Notice of Appeal must contain your name, your mailing address, your daytime

telephone number and a statement of the relief you seek. With your Notice of Appeal, you may also file a short statement of facts, reasons, and legal authority for the relief you seek.

Sincerely,
Elisabeth Kitchens
GRAMA Officer
Division of Licensing & Background Checks
Department of Health & Human Services