LAMPIRAN II PERATURAN MENTERI PERHUBUNGAN

NOMOR :

TANGGAL :

**FORMAT LAPORAN BULANAN FORMAT LAPORAN TAHUNAN PELAKSANAAN TUGAS PELAYANAN INFORMASI PUBLIK**

**KEMENTERIAN PERHUBUNGAN**

**BALAI PENGELOLA TRANSPORTASI DARAT KELAS II SUMATERA UTARA**

Alamat : Jl. STM/Persatuan No. 5, Medan 20219 TELP/FAX : (061) 42776006

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**LAPORAN BULANAN**

**PELAKSANAAN TUGAS PELAYANAN INFORMASI PUBLIK**

Minggu/Bulan :

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No** | **Tanggal & Waktu** | | | **Nama & Alamat** | **Permohonan informasi** | **Jenis informasi** | | | | **Keterangan/**  **Status** |
| **Minta** | **Jawab/**  **Selesai** | **Waktu**  **(Hari)** | **Berkala** | **Serta Merta** | **Setiap Saat** | **Dikecualikan** |
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