



APPENDIX A PUBLIC RECORDS REQUEST FORM

Date: _____

Please describe the records you are requesting and provide any additional information to help locate the records as quickly as possible. Use appropriate document title and date, if known.

See attached sheet with additional request details.

I would like to:

- Inspect the records at no charge (I may request copies after inspection).
- Receive copies of the records after paying required copying charges. I am willing to pay up to \$_____ for those copies.

Name (Print)

Mailing Address

City State Zip

Email Phone -

Sign Here Date

**Limitation On Use For
Commercial Purposes**

Washington State law, RCW 42.56.070(8), prohibits the use of lists of individuals for commercial purposes. "Commercial purposes" means that the person requesting the record intends that the list will be used to communicate with the individuals named in the record for the purpose of facilitating profit-expecting activity. By signing below, you are certifying that the lists of individuals obtained through this request for public records will not be used for commercial purposes.

An additional fee may be charged for costs associated with special requests and mailings. Most offices only accept check or money orders.

