



### Request for Public Records

**Date and Time of Request:** \_\_\_\_\_

- Please Check One:**     I want to inspect the records.     I want to receive copies of records.  
 I want to inspect the records first and then select records to copy.

Please note that inspection of records is free and the charge for standard photocopies is \$.15 per page.

**Please Identify Records Requested:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please Enter Contact Information:**

Name: \_\_\_\_\_ Representing: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

\_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Preference for Receiving Copies of Records:**

Format (paper, electronic): \_\_\_\_\_

Method of Delivery:     Mail     Email     In Office     Other (specify below)

\_\_\_\_\_

I understand that records will be provided within the guidelines set forth in the Revised Code of Washington (RCW) Chapter 42.56 and YRCAA Administrative Code, Part C, Section 1.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Other Information:**