OKANOGAN COUNTY – REQUEST FOR PUBLIC RECORDS

Requester's Name: ____________________________________________

Mailing Address: ____________________________________________
Street City State Zip

Daytime Phone Number: ___________ Email: _________________

Description of records (Please be as specific as possible. If known, include author, recipient, title, date or date range, etc.)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

List each Department, Office or Official having custody of the records requested:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

After the County retrieves the requested records, I request:

[ ] Inspection Only [ ] Copy All [ ] Inspection, then copy selected pages
(Standard copies are 15 cents per page. There is no charge to inspect documents.)

Date desired: ________________ [Most requests are filled within five business days]

If my request is for a list of individuals, I certify under penalty of perjury under the laws of the State of Washington that the information obtained through this request will not be used for commercial purposes. I understand and acknowledge that Okanogan County does not warrant the accuracy or completeness of information contained in public records or any data provided electronically.

Date ________________ Place ________________ Signature ________________

FOR USE BY PUBLIC RECORDS OFFICER

<table>
<thead>
<tr>
<th>DATE RECEIVED:</th>
<th>DATE</th>
<th>INITIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>FIVE-DAY NOTICE SENT:</td>
<td>________</td>
<td>________</td>
</tr>
<tr>
<td>REQUEST APPROVED/SATIFIED:</td>
<td>________</td>
<td>________</td>
</tr>
<tr>
<td>REQUEST DENIED:</td>
<td>________</td>
<td>________</td>
</tr>
<tr>
<td>EXEMPTION STATEMENT:</td>
<td>________</td>
<td>________</td>
</tr>
</tbody>
</table>

PUBLIC RECORDS REQUEST FORM – ONE PAGE ONLY