

TOWN OF WILBUR  
14 NW DIVISION STREET, P.O. BOX 214  
WILBUR, WA 99185  
PHONE: 509-647-5821, E-MAIL: [tow@wilburwa.com](mailto:tow@wilburwa.com)

REQUEST FOR/ACCESS TO PUBLIC RECORDS

Department \_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

If emergency request, indicate date desired: \_\_\_\_\_  
Other wise a response will be given within 5 business days.

**RECORDS REQUEST:**

Title of Record: (Use appropriate document title and date, if known.) \_\_\_\_\_

Date of Record \_\_\_\_\_

Please describe below the records you are requesting and any additional information that will help us locate them for you as quickly as possible.

Washington State law, RCW 42.17.260(5), prohibits the use of lists of individuals for commercial purposes. If I or someone else uses these records for commercial purposes, I may violate the rights of the individuals named and I may be liable for damages. "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.

I certify that the lists of individual obtained through this request for public records will not be used for commercial purposes.

Signature \_\_\_\_\_

Number of copies \_\_\_\_\_

Number of pages \_\_\_\_\_

Per page charge \_\_\_\_\_ .15 \_\_\_\_\_

TOTAL CHARGES \_\_\_\_\_

**FOR STAFF USE ONLY**

Received by: \_\_\_\_\_ Responded by: \_\_\_\_\_

Disposition of request: \_\_\_\_\_

**NO.** \_\_\_\_\_