



# Town of Wilbur

## Public Records Request Form

Public Records Officers' Email: [deputyclerk@wilburwa.com](mailto:deputyclerk@wilburwa.com)

Mail: P.O. Box 214

[www.wilburwa.com](http://www.wilburwa.com)

Wilbur, WA 99185

PHONE: 509-647-5821

Requestor's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**Preferred Method of Response**

- Please make records available for review only
- Please provide hard copies (fees will apply)
- Please provide emailed copies (fees will apply)
- Please mail copies (fees will apply)
- Please call me to pick up.

Please identify specific records you are requesting and any additional information that will help us locate them for you.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I understand that there may be charges for duplication or electronic transmission of these specific records in accordance to the adopted fees or other statutes. I certify that any lists of individuals will not be used for commercial purposes. I understand that the Town will respond within five business days, either by providing the records requested, providing a reasonable estimate as to when the records will be available, or denying the request.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### FOR STAFF USE ONLY

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_

Request Number: \_\_\_\_\_

5-Day Notice Date: \_\_\_\_\_

Search Comments and Fee Calculations:

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Date Available: \_\_\_\_\_

Date Paid: \_\_\_\_\_