

Public Records Request

Community Transit
Attn: Public Disclosure Officer
2312 W Casino Road
Everett, WA 98204
425-521-6158
executiveoffice@commtrans.org

Record(s) Requested: [Be as specific as possible in describing the record(s) you wish to obtain, such as date, title, subject matter, etc]:

Name of Requestor: _____
(Please Print)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

I understand there may be charges for electronic delivery or duplication of records. A minimum of 5 cents per four files or attachments will be charged to the requester for delivery of electronic records as well as 15 cents per page for standard photocopies. Actual costs are charged for other materials and postage. (Fees may be waived if less than \$2.00.) A complete schedule of public records fees is available on Community Transit's website at www.communitytransit.org.

I certify that any lists of individuals obtained through this request for public records will not be used for commercial purposes. (RCW 42.17.260/42.56.070)

Signature _____ Date: _____

FOR COMMUNITY TRANSIT USE ONLY		
Request received by:	Date:	Time:

Five day response rule begins one working date after receipt of request.

