



Public Records Request Form

Date of Request:	<i>For Internal Office Use Only:</i> Log #
Requester's Name:	Phone:
Mailing Address (Street/PO Box, City, State, Zip):	E-Mail Address:
<p>I would prefer to receive the records in the following format: (pick one)</p> <p><input type="checkbox"/> Electronically (Check one: email <input type="checkbox"/> or CD <input type="checkbox"/>)</p> <p><input type="checkbox"/> Paper copy (Check one: US mail <input type="checkbox"/> or in person pick up <input type="checkbox"/>)</p> <p><input type="checkbox"/> Review in person</p> <p>Please note that some records may not be available in the format requested.</p>	
<p>Describe the public records you are requesting. You must provide specific details of what you need.</p>	

I certify that any list of individuals obtained through this public records request will not be used for commercial purposes, pursuant to RCW 42.56.070(9).

Requester's Signature: _____

Date:

Send form to: Public Records Officer
 Office of Administrative Hearings
 PO Box 42488, Olympia, WA 98504-2488
 PublicRecords@oah.wa.gov

For Internal Office Use Only:

Date Received:	Date Billing Letter Sent:
Date Response Letter Sent:	Total Amount Due:
Total Number of Pages: or Total CDs:	Date Amount Received: