

ADAMS COUNTY FIRE PROTECTION DISTRICT NO. 5



PUBLIC DISCLOSURE REQUEST

Pursuant to RCW 42.56, Washington State Public Disclosure Act, I hereby request a record maintained by the Adam's County Fire District #5.

REQUEST FOR PUBLIC RECORD

DATE			
NAME			
FIRM/ORGANIZATION			
ADDRESS-STREET	CITY	STATE	ZIP
TELEPHONE NUMBER (Business, Home, etc.)	EMAIL		
IDENTIFY IN DETAIL THE RECORDS/DOCUMENTS THAT YOU ARE REQUESTING: (Use additional pages if necessary)			
I UNDERSTAND PROCESSING OF THIS REQUEST WILL NOT COMMENCE UNTIL THE IDENTIFYING DATA IS RECEIVED BY THIS DEPARTMENT. A RESPONSE TO THE PUBLIC DISCLOSURE REQUEST WILL BE MADE WITHIN FIVE BUSINESS DAYS. I AFFIRM THAT THE INFORMATION PROVIDED TO ME AS A COPY OF PUBLIC RECORD WILL NOT BE USED FOR COMMERCIAL PURPOSES. (Initial)			

MAIL/FAX/EMAIL YOUR REQUEST TO: Adams County Fire District #5 Attn: Public Records Manager 220 S Broadway Othello, WA 99344	PHONE NUMBER (509)488-2951 FAX NUMBER (509)488-7808 EMAIL glebacken@acfd5.com
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Request Processed By: _____
Title

PLEASE NOTE:
There is no charge associated with requests/copies at this time.