For Department/ Office Use Only		
County Department/ Office:		
Date Action Taken:		
Person taking action:		
Special circumstances:		
Received By:		



Please Return to: Ferry County Prosecutor's Office 350 E. Delaware Ave. #11 Republic, WA 99166

Request for Public Records

Name of Person Making Request: (First, Last MI)

Date:		
Time:		
Address:	City: State: Zip Code:	
Phone Number:	Email:	
Request Made:	If you have requested a copy of records:	
☐ In Person ☐ By Email		
☐ By Phone ☐ By Mail	I authorize this public records request and understand that I am	
☐ By Fax	subject to a county fee schedule as stated by statute, or .15 per	
•	page (if no schedule is established) or the actual cost of copying	
I wish to:	the records (Compact Disc, DVD or Thumb Drive). I authorize	
☐ Inspect Records	\$ for the copying or records and postage if necessary and request to be contacted if the amount due is over this amount.	
☐ Receive a Copy of Records	request to be contacted if the amount due is over this amount.	
☐ Paper Copies		
☐ Electronic Media		
(DVD, CD, Thumb Drive)		
To assist us in answering your request accurately and promptly, please identify the records you wish to inspect by referring to a title, name, date of incident, identification number and/or description. If copies are needed, please indicate which file(s) you would like copied. Please refer to the counties fee schedule for the correct costs associated with your request. Please fill out attached page or attach and number your own letter but this page must be completed/ signed in its entirety.		
	(Signature)	
Please fill in and sign your name below if applicable:		
affirm under penalty of perjury that my request is not for commercial purposes. This is only required if the request includes a list of individuals. I understand the use of public records containing lists of individuals for a commercial purpose violates Washington State law and the privacy of the individuals. "Commercial purposes" means contacting or affecting such individuals to facilitate, in any manner, for a profit-making activity. A request for a list of individuals where this is not signed will be denied as per RCW 42.56.070(9).		
	(Signature)	
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Request for Public Records

 _Please attach and number additional pages as necessary