REQUEST FOR PUBLIC RECORDS

Date of Request: _____

I, _____, am requesting the following public
(Print Name)
record(s) from the City of Junction City:

1. _____
   _____

2. _____
   _____

3. _____
   _____

I understand ORS 192 contains exemptions to the public records law and authorizes the City to adopt reasonable rules necessary to protect the records and permit the custodian of public records to carry out regular duties. Upon receipt of this written request, I understand that the City will determine whether the requested record is exempt from disclosure and will respond to requests that are clearly not exempt from disclosure within a reasonable amount of time.

_____
Signature

_____
Phone Number

_____
Address

For Office Use Only:

Date Request Received: _____

Date of Response to Request: _____

Action Taken: _____

_____

_____

_____