



Jefferson Transit Authority Public Records Request

(One form per record request, please)

Name _____ Date _____ Time _____
Address _____
City _____ State _____ Zip _____
Daytime Phone _____ Email Address _____

Records Requested

Please complete as many of the following items as are known or pertinent:

Subject _____ Responsible Department _____
Records Requested _____

Type of Record _____

NOTE: You will be contacted when the files and/or copies you requested are available. Jefferson Transit may need five business days to complete your request or to provide a date by which the records will be available. Public records not exempt from the Public Records Act are available for copying. Black and white copies for most documents can be made by Jefferson Transit for a fee of 15¢ per page. Copies of non-standard format records, such as videotapes, audiotapes, color copies, blueprints, etc., can be made by Jefferson Transit for the actual cost of such copies. This request for a copy of Public Records will be maintained as a portion of the public record. Allowing the inspection and copying of public records by Jefferson Transit is not meant to waive or restrict any copyright, proprietary, or other rights in said documents.

Please mail form to the following address:

Records Officer
Jefferson Transit
63 4 Corners Road
Port Townsend, WA 98368

I HAVE READ AND AGREE TO COMPLY WITH THE ABOVE CONDITIONS.

(Name Printed) _____ (Signature) _____ (Date)

FOR JEFFERSON TRANSIT USE ONLY

Records Reviewed _____
(see other side for additional comments)

Date Records Reviewed _____ **Witnessed By Clerk** _____

Documents Log (These are requested documents that have been included)

Document Type	Subject Matter/Description	Number of Pages

Exemption/Redaction Log (These are requested documents that have NOT been included)

Document Type	Reason for Exemption/Redaction	Number of pages

Total Charge = _____ pages x \$.15 = \$ _____

Receipt # _____