

**DUNES CITY** • 82877 Spruce St. • Phone: (541) 997-3338 PO Box 97, Westlake, OR 97493 • Fax: (541) 997-5751

## PUBLIC INFORMATION / RECORDS REQUEST FORM

(Please print all except signature)

"Public information" is defined in ORS 192.410 -192.500 and in the Oregon Attorney General's Public Meetings and Records Manual. The sources referenced also list several limited circumstances under which a public body may decline to release certain information.

Because the identity and motive of the person seeking disclosure of a particular public record may be relevant in determining whether a record is exempt from mandatory disclosure under a conditional exemption, please provide the following information:

Name:			Date:
Address:			E-Mail:
Phone: Home:		Work:	Cell:
record(s), being spe	ecific enough for th	e City to determin	statement describing the requested information / ne the nature and content of the record(s) and where
Purpose of Reques	<u>t</u> : Please give a bri	ief statement as t	the purpose of your request:
Response will be p records. A copy of	ursuant to Dunes C such policy is available. Payment of the	City policy for hon able for your review fee must be rece	Il be submitted to Dunes City Hall for response. oring such requests for inspection and copying of City ew. In most cases, there will be a fee charged for ived prior to the release of the requested materials. You request.
staff. (Photocopy ch	narges in conjunction	on with investigat	num, for requests requiring investigation or research by on shall be \$0.10/page). Requests requiring attorney City is charged for attorney time.
Photocopy charges	without research:	regular 8 ½ x 11, a	nd legal 11 ½ x 14: \$0.25/page, 11x17 inch: \$0.50/page.
Signature:			
For use by Dunes	City Staff only		
Date Processed:		Other Cha	rge:
# of copies:		Total Paid	: <u> </u>
Staff Time:	Hours @	City Offici	al·