



Request to Inspect Public Records

To: _____
(person in charge of record and department)

Name of requestor (please print): _____

Requestor Address: _____

Phone Number(s): _____ Fax Number _____

E-mail: _____

Please check how you would like to receive requested documents:

Pick Up Fax Email

Pursuant to ORS 192.410 – 192.505, I request inspection of the following records in your office:

By signing this form you understand the following:

The City has adopted reasonable measures to ensure the integrity of its records and effectiveness of its office operations. The City will respond in writing to my written request as soon as practicable and without undue delay. If any material contained in this request is exempt from disclosure, I understand the City of Milwaukie will provide the name of the document and the reason for the exemption. The records custodian will notify me of any costs related to this request based on fees in its annual fee resolution reasonably calculated to reimburse the City for its actual costs.

Signature: _____ Date: _____

For Office Use Only:

Invoice #: _____ Reference #: _____ Amount Due: _____

Completed Date: _____ By: _____