

Paterson School, [ADDRESS]

Paterson School District Public Records Request Form

Please print this page and mail it to the Paterson School District at [ADDRESS].

Name of Requestor: _____

Company/Organization: _____

Phone Number(s): _____

Fax Number: _____ **Email address:** _____

Mailing Address:

Name and Detailed Description of Records or Information Requested:

I understand that my request is subject to disclosure under the Washington State Public Records Act (Chapter 42.56 RCW). I understand that if a list of individuals is provided to me by Paterson School District, it will neither be used for commercial purposes or to give or provide access to material to others for commercial purposes as prohibited by RCW 42.56.070(9).

Signature: _____