

## Public Records Request

Date of Request: \_\_\_\_\_

Name of Requestor: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Do you intent to inspect the records in person, obtain a photocopy at the costs identified, or receive the records electronically?

\_\_\_\_\_

What is the method (telephone, email, US Mail) we should use to communicate with you?

\_\_\_\_\_

**Description of the records you wish to request.** Include the date and location of the record if known.

Submit via US Mail: Highline Public Schools  
15675 Ambaum Blvd. SW  
Burien, WA 98166  
Attn: Michelle Terry, Public Records Officer

