



## RECORDS REQUEST FORM

Please complete this form to request a public record.

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Signature \_\_\_\_\_

**Requested Information/Record(s):** Provide a brief statement describing the requested information/record(s), being specific enough for the City to determine the nature, content and probable department within which the record(s) you are requesting may be located:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Routine requests will be handled within each department. More complex requests will be forwarded to the City Attorney for response. The City Attorney's response will be pursuant to the City of Lake Oswego's policy for requests, inspection and copying of City Records. A copy of the policy is available for your review. In most cases, there will be a fee charged for providing this service. Payment of the fee for meeting your request must be received prior to the requested materials being released. You will be advised by the City Recorder of the fee for your request.

**Records Request Fees\***

Research time: \$20/per 15 minutes

Photocopies: \$0.25 per page

DVD/CD: \$19 1<sup>st</sup> copy/\$16 additional

Flash Drives: \$6/\$12/\$20 (8/16/32 MB)

*\*See Master Fee Schedule for a complete list.*

**Submit this form to:**

Anne-Marie Simpson, City Recorder

P.O. Box 369 (380 A Avenue)

Lake Oswego, OR 97034

<b>Date processed:</b> _____
<b># of copies:</b> _____ @ _____
<b>Staff time:</b> _____ hours @ _____
<b>Total fee:</b> \$ _____
<b>Account:</b> _____