City of La Pine

Public Records Request Form

This Public Records Request Form must be completed and submitted to City of La Pine ("City") to inspect or obtain copies of City's public records (as defined under ORS 192.311 - 192.431). Persons interested in making a public records request are advised to review City's public records request policy (Resolution No. 2019-09). You may contact City's city manager if you have any questions or concerns regarding this form or the public records request process.

A.	Requester Information		
Name	of Requesting Individual:		
Mailir	ng Address:		
City: _		State:	Zip:
Telep	hone No.: Facsimile No.:	Email:	
В.	Record(s) Requested		
public the re	ibe the public record(s) you are requested, including the equested public record(s) as may be crecord(s).	dates, subject matter, and such	other information concerning
 C.	Purpose of Records Request		
releva	use the identity and motive of the pe ant in determining whether a record ption, please provide a brief statem	is exempt from mandatory disc	osure under a conditional
D.	Receiving Record(s)		
public	e specify the delivery/inspection dat crecord(s), if applicable. City does rered or made available by your desir	not guaranty that the requested	· .
□lw	ould like to view/inspect the record	(s) on	·
□ Iw	ould like to receive copies of the re	guested public record(s) not late	r than by:

□ Mail	☐ Facsimile	☐ Will pick	c-up □ E	mail					
I have received and r	reviewed City's fee sch	edule (ini	tial)						
I understand that I will not receive the requested public record(s) unless and until I have paid the fees estimated by City for providing the requested public record(s). If the estimated fees exceed City's actual cost, the overpayment will be refunded to me. I will pay additional fees to the extent the estimated fees are less than the actual expenses incurred by City (initial)									
Signature:			Date:						
		For City Use Or	nly						
Date Request Receiv	ed:			Time:					
Estimated Fees:									
☐ Request Approve	d – requester notified o	on:	by:						
□ Telephone	. □ Mail	□ Fax	□ Email	□ In-Person					
☐ Request Forwarde	ed to City Attorney For	Review – forwa	rded on:	by:					
☐ Request Denied —	requester notified on:		by:						
□ Telephone	. □ Mail	□ Fax	□ Email	□ In-Person					
Reason for Denial	:								
☐ Office doe	es not maintain record(s) 🗆 Other: _							
Notes:									
_									
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_									
Request filled by:		Date:		Foos.					