

WHATCOM COUNTY FIRE DISTRICT NO. 7

P.O. BOX 1599 FERNDALE, WASHINGTON 98248 360-384-0303

REQUEST FOR PUBLIC RECORD

NAME OF REQUESTOR: _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP _____

PHONE: _____ DATE OF REQUEST _____ TIME _____

NATURE OF REQUEST:

1. Identification of records: _____

2. Inspection only _____

3. Number of copies requested _____

Signature _____

For Office Use Only:

(1) Request _____ Record _____ Record Withheld
Granted _____ Withheld _____ In Part _____

Date _____ Time _____

(2) If withheld, name the exemption contained in RCW 42.17.30 which
authorizes the withholding of the record or part of records:
Subsection (1) ().

(3) If withheld, explain how the exemption applies to the records withheld:

Signature _____