

**City of Joseph**

CITY ADMINISTRATION - RECORDS

**Public Records Request**

Oregon Public Records Law grants each person the right to inspect the records of a public body (unless exempt from disclosure). City staff will contact you within 72 hours of receiving this request.

**\*\* PLEASE READ \*\***

**Date of Request:** \_\_\_\_\_ Have you already contacted someone within the City about this request?

**Name:** \_\_\_\_\_ [ ] Yes [ ] No

**Daytime Phone:** \_\_\_\_\_ **Name:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_ Are these records pertaining to a case that is currently open? Such as

**Work Phone:** \_\_\_\_\_ Code/Building Enforcement or Land Use Board of Appeals (LUBA) cases?

[ ] Yes [ ] No

**This form may be submitted: Prices:**

To City Records at: 8-1/2 x 11".....\$ .25/page

City of Joseph 8-1/2 x 14".....\$ .30/page

P.O. Box 15 11x 17".....\$1.00/page

Joseph, OR 97846

Budget/Audit Documents.....\$25.00 ea.

Faxed to City Records at: 541/432-3832

**Description of records requested (please be as specific as possible)** \_\_\_\_\_

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

**\*\*\* FOR RECORDS STAFF USE ONLY \*\*\***

**Notes:** \_\_\_\_\_ **Number of Documents Removed:** \_\_\_\_\_

\_\_\_\_\_ **Files:** \_\_\_\_\_ **Boxes:** \_\_\_\_\_

\_\_\_\_\_ **Removed by:** \_\_\_\_\_

\_\_\_\_\_ **Time Spent:** \_\_\_\_\_

\_\_\_\_\_ **Returned/Ref-filed Date** \_\_\_\_\_