



Public Records Request Form

Section A – Requestor Information

NAME OF REQUESTING INDIVIDUAL		DATE OF REQUEST	
PHONE		EMAIL	
FIRM OR TRADE NAME			
BUSINESS ADDRESS			
CITY	STATE	ZIP	
MAILING ADDRESS (IF DIFFERENT)			
CITY	STATE	ZIP	

Section B – Record(s) Requested

Describe the record you are requesting. Please be as specific as possible and include enough detail to assist the district's staff in locating the record(s). For multiple records, attach additional pages.

DESCRIPTION OF RECORDS REQUESTED	
Requestor Signature	Date

Section C – Receiving Record(s)

Per ORS 192.324, for public records request with an estimated cost of more than \$25 Bend Park & Recreation District is required to provide the requestor with a written notification of the estimated amount of the fee. The fee is due in advance if the requestor wants the district to proceed with making the records available.

The district estimate of job cost: \$ _____

Requestor confirms receipt of job estimate and authorization to proceed with making records available. Requestor agrees to the terms of pre-payment of estimated job costs, and agrees to pay for any additional costs after job completion.

Requestor Signature	Date
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OFFICE USE ONLY

ESTIMATE	REQUEST STATUS	PAYMENT STATUS
An estimate of \$ _____ was provided on _____ by _____	<input type="checkbox"/> Authorization to Proceed <input type="checkbox"/> Request Withdrawn <input type="checkbox"/> Information provided and request completed	Amount Received: \$ _____ <input type="checkbox"/> Cash <input type="checkbox"/> Check