## COSMOPOLIS SCHOOL DISTRICT

## REQUEST FOR PUBLIC RECORD

		DATE		
NAME				
FIRM/ORGANIZATION				
ADDRESS-STREET	CITY		STATE	ZIP
TELEPHONE NUMBER (Business., Home, etc.)	EMAIL			
IDENTIFY IN <u>DETAIL</u> THE RECORDS/DOCUMENTS THAT YOU ARE REQUESTING: (Use additional pages if necessary)				

# MAIL/FAX/EMAIL YOUR REQUEST TO:

Cosmopolis School District Attn: Public Records Officer

PO Box 479

Cosmopolis, WA 98537

PHONE NUMBER 360-532-7181 FAX NUMBER 360-532-1535

EMAIL cpatterson@cosmopolisschool.com

#### **PLEASE NOTE:**

There is no charge associated with requests of less than 40 pages of records.

If the volume of records exceeds the minimum number of pages, it is the policy of the District to receive all costs associated with a public disclosure request prior to providing the documents.

We calculate the actual copying costs based on the following charges and notify you of the total after the requested records are identified.

## **Copying Fees:**

\$0.15 each letter and legal sized documents

\$0.50 each 11 x 17 size documents

\$5.00 each certified copies

At Cost maps, color copies, computer disks, binders, etc.
At Cost postage charges for mailing of requested materials

(Pursuant to WAC 332-10-170)