## FERNDALE MUNICIPAL COURT

FERNDALE, WASHINGTON

## Administrative Records Request Form

Requestor Inform	nation:			
Printed Name:	Last	First	MI	
Address:				
	Street	City	State	Zip Code
Telephone: ( )		( )	FAX: ( )	
E-mail Address:				
Signature:				
[ ] This is a reque	est to inspect the re	ecords identified abo	ve.	
[ ] This is a reque	est for copies of the	e records identified a	above.	
[ ] Other:				
Explain please				

## **Procedures:**

- (1) The Public Records Officer will respond within five (5) working days from receipt of this administrative records request, unless this request is to a court that meets irregularly. In such case, the response to the request will be provided within thirty (30) calendar days of the request.
- (2) The procedures, the fee structure for providing records and the process for appealing the decisions of the Public Records Officer regarding exemptions, redaction and identification of the records can be found at www.ferndalecourts.org. If you would like a printed copy of the procedures, please contact the public records officer using the information noted below.

Public Records Officer:			
Name: Faith Miller	Phone: ( 360 ) 384-2827		
<u>Fax:</u> (360)312-0106	E-mail Address: faithmiller@fer	ndalecourts.org	
For Office Use:			
Request Received:	at	AM/PM	
Bv <sup>.</sup>			