

PUBLIC RECORDS REQUEST

It is the policy of Finley School District to make available for inspection and/or copying all district

•	osure subject to t		ned by laws, except those wh tations, and qualifications set t	
* Required Fields				
Requester Information Name*	(we will honor a	anonymous reque	est)	
Company / Organization				
Email*				
Address line 1*				
City*	State*	Zip Code*	Phone*	
Description of the document(s) you are requesting*				
Please provide enough info page if necessary.	rmation that we m	ay identify and locat	e the records you seek. Attach a	dditional
Time period of the info	rmation you are	e seeking:		
State Date*	End Date*			

If the request is for a list of individuals, I certify, by checking this box, that the information will not be used for commercial purposes. The district is not authorized to provide public records consisting of a list of individuals for commercial use (RCW42.56.070(9)).

Records Delivery Options

Select one option to receive the records.* Applicable charges per RCW 42.56.120(2) will be applied. Mailing costs will be additional.:

Electronic files Review of the records only Printed copies