

# CITY OF WINSTON

201 NW Douglas Blvd., Winston, OR 97496  
Office 541-679-6739 Fax 541-679-0794

## Public Information / Records Request

Public information is defined in ORS 192.410 – 192.505 and in the Attorney General’s Public Meetings and Records Manual. The sources referenced also list several limited circumstances under which a public body may decline to release certain information.

Because the identity and motive of the person seeking disclosure of a particular public record may be relevant in determining whether a record is exempt from mandatory disclosure under a conditional exemption (i.e., whether the public interest requires disclosure), please provide the following information:

### **Requester’s Identity:**

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

### **Requested Information / Record(s):**

Please give a brief statement describing the requested information/record(s). If you need more area to describe the requested information, please attach a second page.

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

### **Purpose of Request:**

Please give a brief statement as to the purpose of your request.

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

With my signature, I agree to pay all research, copy, supervision fees and deposits required.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All requests for inspection or copies of City records shall be submitted to the Public Records custodian, City Manager, Court or Police records clerk for response. The city’s response will be pursuant to the City of Winston’s policy for request, inspection and copying of City records. A copy of such policy is attached for your review.

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Title/Dept. \_\_\_\_\_