

City of Walla Walla Public Records Request

Submit to:
City Clerk
15 N 3rd Avenue
Walla Walla WA 99362
509-524-7933 – fax
publicrecords@wallawallawa.gov

Name of Requestor:	
Mailing Address: (include City, State and Zip Code)	
Telephone Number:	
E-mail Address*:	
Date:	

Please check only one box: I wish to inspect or have photocopies made of the following identifiable public record(s). Please provide the name of the record(s), the dates of the records, and any other information that will assist us in locating the requested public record(s):

If this is an emergency request, indicate date desired and why the emergency exists:

I understand that Washington State law, RCW 42.56.070(9) prohibits the use of lists of individuals for commercial purposes and that the use for commercial purposes of these records may also violate the rights of the individuals named and may subject me to liability for such commercial use. I understand that “commercial purposes” means that the person requesting the record intends or permits the list to be used to communicate with the individuals named in the record for the purpose of facilitating profit-expecting activity.

I do hereby swear and affirm on oath and under penalty of law that I will not use the requested records for commercial purposes and that I will prevent others from using the records for commercial purposes.

Signature of requestor

**If provided, your e-mail address will only be used to communicate with you regarding this records request.*