



Buckley Police Department

Chief James Arsanto

REQUEST FOR PUBLIC RECORDS

Requested By		
Name:	Date of Request:	
Mailing Address:		
City, State, Zip:	Phone No.:	
Your Relationship to Incident:		
Incident Information		
Supply as much identifying information as possible/may use back of page if needed.		
Case Number:	Date & Time of Incident:	Location:
Parties Involved:	Investigating Officer:	
Please Check the following:		
Pick up: <input type="checkbox"/>		
Mail: <input type="checkbox"/>		
Fax: <input type="checkbox"/> Fax number: _____		
Email: <input type="checkbox"/> Email address: _____		
Additional Comments:		
~ IMPORTANT – PLEASE READ AND SIGN ~		
<p><i>Pursuant To RCW 42.56, Washington State Public Disclosure Act, I hereby request a copy of the following documents maintained in the files of the Buckley Police Department. I understand that requested records may be redacted in accordance with RCW 42.56.</i></p>		
<p><i>I understand per RCW 42.56.120 the City of Buckley will charge for copies of records.</i> \$0.15 per page \$5.00 for accident reports and \$10.00 for all audio and CD's</p>		
<p>~Requester's Signature~: _____</p>		
For Agency Records Clerk Only		
Date Request Fulfilled:	Records Clerk Signature:	
Contact of Requestor:		
Acknowledgement of Release of Records		
Date Received:	Recipient's Signature:	

This document may be hand-delivered or mailed to the address below. You may also fax this Records Request to 360 829-0133.