

PUBLIC RECORDS REQUEST FORM

Last reviewed: September 2025

The North Douglas Library District shall fully comply with the Oregon Public Records Law (ORS 192). In order to facilitate the public's access to records in the District's possession and to avoid unnecessary expenditure of staff time, persons requesting public records from the District shall use this form, as outlined in the District's Public Records Policy. **Please complete this form and return it to the North Douglas Library District, c/o Library Director. Note: Information included with this request form is subject to public record. Your private information (phone number, email, etc.) will be protected to the greatest extent possible.**

REQUESTER'S INFORMATION

Requester's Name _____
(last) (first) (middle)

Name of Organization (if applicable) _____

Mailing Address _____
(# and street) (city) (state) (zip)

Phone () _____ - _____ Email _____ @ _____

REQUESTED INFORMATION/RECORD(S)

Please provide detailed description(s) of the type of record(s), subject matter, approximate date(s), names of persons involved, and any pertinent information that may assist District personnel in locating the requested record(s). Please attach additional pages as needed.

☐ I wish to arrange an opportunity to personally inspect the requested records.

☐ I wish to receive copies of the requested records.

The number of copies, and copy format requested: _____

If you're seeking a fee waiver or reduction, please explain how making these records available primarily benefits the general public:

I understand that under Oregon's Public Records Law (ORS 192) the public has the right to inspect and copy certain public records upon request unless the information is specifically exempt from such disclosure. I understand the North Douglas Library District may charge fees for reimbursement of actual costs in making records available and I will be provided an estimate free of charge. Payment is required in advance for charges estimated over \$60. Unclear or incomplete requests will be asked to provide clarification and/or additional details. Please see the District's Public Records Policy for Public Records Request procedure. I request that the North Douglas Library District's Public Records Custodian make available, as best to their ability, the records specified above.

Requester's Signature: _____ Date: ____/____/____

Date Received: _____ Time: _____ Staff: _____

Number of Copies: _____ x \$ _____ = \$ _____

Staff Time: _____ Hours @ \$ _____/hr = \$ _____

Consultant Time: _____ Hours @ \$ _____/hr = \$ _____

Other Charge(s): _____ = \$ _____

Total amount due: = \$ _____

Date Fee(s) Paid: _____

DISTRICT STAFF USE

- [] The District is not in possession of the requested records.
[] Further information is required to clarify the request. Please provide the following:

- [] Copies of the requested records are attached.
[] To fulfill this request, the District estimates it will take approximately _____ to provide the records. The estimated cost is \$ _____.
[] The public records requested are exempted from public disclosure under state and/or federal law, per ORS 192.

Compiled by: _____ Date: _____