FOR-101A



## Lewis County Transit PUBLIC RECORDS REQUEST FORM

212 E Locust St, Centralia, WA 98531 Phone (360)-330-2072 Fax (360)-524-7895 www.lewiscountytransit.org

REQUESTOR'S NA							
STREET ADDRESS	S:						•
MAILING/EMAIL	ADDRESS: _						
TELEPHONE NUM	ИВЕR:						
RECEIVED REQU	EST VIA:	Email	Fax	In person	Phone	Form Used	
that will help us loca them electronically	nte said record or have them gth of time. Do	ls (dates, nam copied. The epending on	es, etc.). Pleas Revised Code the complexit	se indicate who e of Washingto	ether you war on states that	g and any additional info nt to review the records of records must be made unty Transit will respon	r rece availa
	vill inspect the	documents at	Lewis County	Transit prior to			
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## DECLARATION UNDER PENALTY OF PERJURY

	I have requested a list of individuals from Lewis County Transit.
2.	I am requesting the list of individuals on behalf of (check the appropriate answer):
	My own personal behalf (skip to 3)
	An organization or business (complete a – d before proceeding to 3) a) If an organization or business, the name is:
	b) If an organization or business, the type or an organization or business is:
	c) If an organization or business, the mail address and website address are:
	c) If an organization of business, the man address and website address are.
	d) If an organization or business, (i) it is a professional association or educational organization recognized by the professional licensees of the subject area of the association
	or organization: Yes No
3.	The purpose that I am making this request for the list of individuals is:
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4.	I or the organization/business intend to generate revenue or financial benefit from using the list of individuals:YesNo
5.	I or the organization/business intend to solicit money or financial support from any of the individuals on the list:YesNo
6.	I or the organization/business intent to make individuals on the list aware of business commercial
	entities, business/financial enterprises or business/financial opportunities:YesNo
7.	I or the organization/business intend to supply or sell the list of individuals to any organization or
	business, third party individual, or any other entity:YesNo
	• If yes, to whom:
Q	I or my organization/business attest that another law authorizes or directs the agency to provide
0.	me or my organization/business the list of individuals requested:YesNo
	• If yes, provide specific citation:
	I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. I certify under penalty of perjury that I have read this declaration form and I understand that a list of individuals cannot be provided to me or to my organization or business by a public agency if the list will be used for a commercial purpose. I certify under penalty of perjury that any list of individuals that I or my organization or business receive from Lewis County Transit will not be used for any commercial purpose in violation of RCW 42.56.070(9).  DATED this of, 20 in (City, State)
	(day) (month) (year) (City, State)
	Signature of Declarant Print Name
	Declarant's Title (if any):
	Declarant's Contact Information (phone or email, or both):