

REQUEST FOR DISCLOSURE OF PUBLIC RECORDS

Walla Walla Housing Authority (WWHA) will make available for inspection and/or photocopying all public records unless exempt from disclosure under chapter 42.56 of the Revised Code of Washington (RCW).

<u>Charges:</u> A fifteen cents per page is required for photocopies or printed copies of electronic records, plus postage if applicable. A ten cents per page charge is required for all records scanned into an electronic format, plus five cents for every four electronic files/attachments uploaded to an email, cloud storage service or other electronic delivery system plus ten cents per gigabyte for transmitting records electronically. Payments may be required prior to documents being mailed, faxes or scanned. There is no charge for reviewing documents or files.

<u>Hours for Review:</u> Public records are available for inspection and photocopying Monday through Friday, 10:00am to 5:00pm, excluding legal holidays or other observed closures. An appointment is required.

<u>Public Records Disclosure Procedure:</u> You can review WWHA's complete Public Records Disclosure on its website at http://www.wallawallaha.org/#/contact-us/ or by asking the public records officer to view a copy.

Please complete the following; print clearly or type:			
Name:	Telephone:	Email:	
Address:	City/State/Zip Code:		
applicable, inclusive	Please be as specific as possible dates, project names, program nanclude extra pages as needed.	•	

If you or anyone in your family is a person with disabilities, and you require a specific accommodation in order to fully utilize our programs and services, please contact the housing authority.



I wish to: □ inspect records □ receive a copy/ic than \$	es \Box contact me if copying/scanning cost is greater
I,, certify that for public records will not be used for commercial	at the lists of individuals obtained through this request al purposes pursuant RCW 42.56.070.
Requestor's Signature:	Date:
Please send your records request to: Rosanna Mo 501 Cayuse Street, Walla Walla Washington 993 wwha@wallawallaha.org	_
FOR WWHA USE ONLY:	
Date received:/ Five-Day Response	Due:/ Sent:/
Notification of Records Available://	Request completed:/

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