Renton Municipal Court

Administrative Records Request Form

Requestor Information:

Printed Name: _____
Last First MI

Address: _____
Street City State Zip Code

Telephone: ( ) _____ ( ) _____ FAX: ( ) _____

E-mail Address: _____

Signature: _____

Description of Requested Record (s). It is important to be as specific as possible as to name, location, date, and type of record requested. Please use additional sheets as necessary.

_____

_____

_____

_____

_____

_____

[ ] This is a request to inspect the records identified above.

[ ] This is a request for copies of the records identified above.

[ ] Other:

Explain please_____

_____

_____

_____

Procedures:
(1) The Public Records Officer will respond within five (5) working days from receipt of this administrative records request, unless this request is to a court that meets irregularly. In such case, the response to the request will be provided within thirty (30) calendar days of the request.
(2) The procedures, the fee structure for providing records and the process for appealing the decisions of the Public Records Officer regarding exemptions, redaction and identification of the records can be found at www.rentonwa.gov/court . If you would like a printed copy of the procedures, please contact the public records officer using the information noted below.

Public Records Officer:

Renton Municipal Court
Yanna Filippidis, Public Records Officer
1055 South Grady Way
Renton, WA 98057-3232
Office: 425-430-6531
Fax: 425-430-6544
E-mail Address: yfilippidis@rentonwa.gov

Request Received: _____ at _____ AM/PM

By: _____