

City of Edna Bay

www.cityofednabay.org

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PUBLIC RECORDS REQUEST FORM

Name:	Phone:	Cell:
Name of Business, Law Firm and/or Company:		
Address:	Cit <u>y:</u>	State: Zip:
Email:		Fax <u>:</u>
The requested public record is strictly for:		
\square My own personal use. \square On beha	alf of:	
I would like the documents delivered to me by:		
☐ Mail (address listed above) ☐ Fax (listed above)	☐ Email(listed above)	□ Will Pick Up □ For Review
I certify that I am not involved in litigation, in a judic representing any party who is involved in litigation wi		
I understand that I will be charged a fee of .25 cents for transmission. I further understand that if it is determine calendar month that I will pay, upon notification, the transks per AS 40.25.110(c)	ed that my request (s) will re	equire more than five hours of staff time per
Date:	Requestor's Signature	
Doo	cuments Requested	
Identify and describe the documents you seek. Be spec	1	
Title of Record:		
Date of Record:		
Description of Record:		
Department/City Manager Signature:		Date;
☐ Approved ☐ Denied – reason for denial:		
Publ	lic Records and the Law	

Information on Alaska's Public Records Laws can be found in Alaska Statues 9.25-100–220, and in City of Edna Bay Code Title 2. Exceptions to the policy that a city document should be released to the public when there is a request can be found in Alaska Statutes 9.25.120 and City of Edna Bay Code Title 2.