

REQUEST FOR PUBLIC RECORDS

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en records are available, pleas		heck one):	Mail	Phone	Fax	Ema
quest copies of the following p						
uestor Signature					Date	
Mail, email or fax this				•	'A 98503 Em	ail:
<u>POD</u>	Customerservice	@ThurstonPUD.o	r <u>g</u> Fax (3)	50) 357-1172		
	PU	D STAFF – FILL OU	T BELOW			
Person Receiving Request:	Mail	Phone	Fax	Date: Email		
Request Made: Person Responding:				Date:		
Response Sent:				Date:		
Comments:				Date:		
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