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CITY CLERK'S OFFICE SPOKANE, WA



PUBLIC RECORDS REQUEST (RCW 42.56)

	DEPARTMEN	NT:			
NAME: \overline{k}	TAN MAN LIT		01	AC)	
	ON WRIGHT		DATE: <u>04</u>	75-08	
TELEPHONE: 9	51-233-07/0		E-MAIL: MA	9350@6MAIL.COI	r
ADDRESS: 🙎	921 N. WILKN .	TRAIL #136		<u>-</u>	•
CITY:	POKANE	STATE	WA.	ZIP: <u>99208</u>	
Please be as specification reviews the second requesting to review to the second requesting the second requesting to the second requesting the second requesting the second requestion requesting the second requesting the second requesting the second requestion requesting the second requestion	I/DESCRIPTION OF RECORDS cific as possible. We will be able ew. Note that pursuant to RCW	to process your request f 42.56.520, we have five (8 F) LES/MEMOS	b) business days	y identify the records you are to respond to your request. OF ARSON/MUR	r V
FIRE AT 03-02-8	ZUKOR CLOT	LISNG/JAMISK	IY BLOCA WAS KI	LED FIGHTING THIS	D,
DSOIN N 6		be required). ☐ Mail ☐ Call	records (prepayn me - will pick up	PLON POST S) nent required). records.	ř—
FOR DEPARTME	NT USE ONLY:				
Date Received:		Staff:			
Date Completed:		Staff:		··-·	
Copies Provided:	☐ Yes ☐ No	Total:			
Request Denied:	Yes No	Reason:			
Comments:	·				
SUBMIT COMPLE	TED FORM TO: City Clerk's	Office	· · · · · · · · · · · · · · · · · · ·		

5th Floor City Hail 808 W. Spokane Falls Blvd. Spokane, WA 99201 (509) 625-6350 FAX: (509) 625-6217