



Attn: Public Records Request Officer
Department of Human Services
Office of Communications
500 Summer Street NE, E-25
Salem, OR 97301

Re: Request for Disclosure of Public Records

To Whom It May Concern:

I/We, request that the Department of Human Services and its employees make available for inspection or provide copies of the following records:

- 1.
- 2.
- 3.

I wish to arrange to personally inspect the requested records.

I wish to receive hard copies of the requested records.

I wish to receive electronic copies of the requested records in the following format:

E-mailed PDF

CD

3X5 Computer Disc

Other:

A cost estimate for these records can be sent to me by:

E-mail, my e-mail address is:

Mail, my address is:

Fax, my fax number is:

Other, please describe:

Requestor's Signature: _____