

**MASON TRANSIT AUTHORITY**  
**REQUEST FOR PUBLIC RECORDS**

Name of Requestor:		Date Requested:	
Address of Requestor:		Phone:	
		Fax:	
		Email:	
Representing (If applicable):			
Review Records Only:		Copy(s) Requested:	
Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Charges (completed by Mason Transit Authority)	
		Copies @ \$.15 ea.: \$ _____	
		Materials: TBD \$ _____	
		Postage: TBD \$ _____	
		DVD/CDROM@\$1.00 \$ _____	
Records Request: (Be as specific as possible in defining the record(s) you wish to obtain, such as dates, time, route number, subject matter.)			
I acknowledge that by releasing this record(s) to me, Mason Transit Authority does NOT thereby give me authority to use it to compile any data for commercial purposes.			
<div style="border-top: 1px solid black; width: 20%; margin: 0 auto;"></div> Signature of Requestor			
TO BE COMPLETED BY MASON TRANSIT AUTHORITY			
Actions Taken and By Whom:			
Request Granted:		Request denied for the following reason(s):	
Yes <input type="checkbox"/> No <input type="checkbox"/>			
Staff person completing request:		Date sent to Public Records Officer:	
Date Public Records Officer Reviewed and Filed:		Signature of Public Records Officer:	

**Forward Requests for Public Record(s) to:**

**Kathy Geist T-CC Manager/Records Officer**  
**Mason Transit Authority**  
**790 E John Prairie Rd. Shelton, WA 98584**  
**Email to: kgeist@masontransit.org**  
**Phone: (360) 432-5754**