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## PUBLIC RECORDS DISCLOSURE REQUEST FORM

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	Street	City	State	Zip	
Phone:	hone: E-mail:				
			the records sought. Inclu	ude subject, titles, acronyms	
*Some records m	nay be specifically exer	npt from disclosure. R	CW 42.56.070(1)		
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42.56.070(9), the		est contain a list of		shington, RCW nation obtained through	
Signature of R	equestor		Date		

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