



DATE RECEIVED:

## Washington Higher Education Facilities Authority Request for Public Records Form

The Authority reserves the right to determine that a requested public record is exempt from disclosure under the provisions of Public Records Act at RCW 42.56. In addition, the Authority reserves the right to redact identifying details when, by making available public records, there could be an invasion of personal privacy protected by RCW 42.56.

**USING THIS FORM.** Use this form only for making formal requests of Public Records to the Washington Higher Education Facilities Authority under the Public Records Act at RCW 42.56. If you seek records from another public agency, contact that public agency. If you seek other information from the Authority that is not a Request for Public Records, contact the Authority. Completed Request for Public Records forms and other public records requests are open to the public.

**WEBSITE.** You are strongly urge to view the Authority’s [website](#) before submitting a formal Request for Public Records. The Authority has posted many records and other information on its website which you can copy and download. There is no charge for inspecting records on the website.

**CHARGES.** Charges may apply for providing records. A money order or check (no cash) must be submitted with copy of requests. See [Public Records Fee Schedule](#) for fee details.

**PUBLIC RECORDS OFFICER.** The Authority’s Public Records Officer can be reached at (206) 464-7139, Monday-Friday, 8:00 am – 5:00 pm., closed on state holidays.

**Complete the following:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Company Name: \_\_\_\_\_

Record(s) Requested [ Review  Copy]: \_\_\_\_\_

(Describe the public records you are requesting. Provide as much details as possible – *this will assist the Authority in searching for records.*)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_, understand and certify that if the above requested information contains lists of individuals, said information will **not** be used for commercial purposes.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Continuation...**

**Mail, deliver, or fax to:**

Washington Higher Education Facilities Authority  
1000 Second Avenue, Suite 2700  
Seattle, WA 98104  
*Attention: Public Records Officer*  
Fax: (206) 587-5113

**Email to:**

WHEFA@wshfc.org

*Attention: Public Records Officer*

**Important:** Use only this email address. Emails sent to other agency email address are not formal public records request.

**For Authority Use Only:**

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

Delivered by: \_\_\_\_\_

Date: \_\_\_\_\_

Amount received for copies or electronic distribution: \$ \_\_\_\_\_

Check # \_\_\_\_\_ Money Order # \_\_\_\_\_