



City of Napavine

407 Birch Ave SW P O Box 810 Napavine, WA 98565
Phone: (360) 262-3547 Fax: (360) 262-9199

John Sayers, Mayor
Penny Jo Haney, City Clerk

APPLICATION FOR ACCESS TO PUBLIC RECORDS

Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Records Requested: _____

This agency is not authorized to provide public records consisting of a list of individuals for a commercial use.

RECEIPT FOR DUPLICATED PUBLIC RECORDS

The undersigned, by his/her signature hereon, acknowledges receipt of the documents requested from the City of Napavine.

DATED this _____ day of _____, 20_____.

Signature: _____

OFFICE USE ONLY

Receipt # _____ Amount \$ _____ Processed by: _____