Chelan County Superior Court Clerk Public Administrative Records Request Form

Requestor Information:

	Last	First	MI	
Mailing Address: _	Street	City	State	Zip Code
Telephone: ()		Cell: ()	
E-mail Address: _				
Signature:	Date:			
Description of Re	quested Record (s quested. Please use a	S). It is important to be as sp dditional sheets as necessary	ecific as possible as to n	ame, location, date,
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