

Public Records Request

DATE OF REQUEST

REQU	JESTOR INFORMATION						
Name	:			_ HF Resid	ent 🗆 F	Press	☐ Non-profit
Mailin	g Address:						
Phone	e:	E-mail Addres	s:				
Prefer	red method of contact:	□ Mail □ F	Phone	□ E-mail			
REQU	JEST DETAILS						
1. Is th	nis request related to a laws	uit involving H	ome Forw	ard? □ Yes	□ No		
	If "yes," enter the case nar	me, court dock	et number	, or other ident	ifying infor	mation:	
2. Is th	nis request related to a tort of the state of the state of the claimant the claimant the claimant the state of the state o						lo
	ou answered "yes" to questillawsuit or tort claim?	•	on 2, are y	ou making this	request or	n behalf	of a party in
	If "yes," enter the name of	the party(ies) I	here, as re	equired by state	e law (ORS	3 192.31	4(2)(a)).
poss	swer this question if you a sible if Home Forward deter nting the waiver would not o a. How do you or your org	rmines that this overly burden F	s request i Home Forv	s primarily in th vard.			-
	b. How will the information	benefit the wi	der public:				
	c. How do you or your orga	anization inten	d to share	the informatio	n with the v	wider pu	blic:

5. Does this request pertain to personnel records?	☐ Yes ☐ No						
NOTE: If "yes," please attach a signed release from the pertinent employee(s).							
6. For immigration purposes, please choose one of the	ne following statements:						
☐ I certify that I AM making this request for the purpose of enforcement of federal immigration laws.	☐ I certify that I AM NOT making this request for the purpose of enforcement of federal immigration laws. *Choose this option if you are requesting records about yourself for your own immigration application.						
DESCRIPTION OF RECORDS REQUESTED							
When describing the materials requested, to the exterplease include the type of document, author, date, su property at issue. You may attach additional pages, if	bject matter, title, and/or address of any real						
Home Forward will respond to your request as soon	as practicable and without unreasonable delay.						
We will provide you with a written cost and time es require your approval before beginning work.	stimate for providing the requested documents and						
If the fee estimate exceeds \$25 and no fee waiver is	granted, a 50% deposit may be required to begin work						
Full payment of the total amount of costs incurred is re or copies released.	equired before the public records may be inspected						
I HAVE READ AND AGREE TO COMPLY WITH THE pay the cost of fulfilling this Public Records Required cost of searching for records, reviewing records to inspection of records, copying records, certifying	lest, as applicable. These costs may include the to redact exempt material, supervising the						
Signature of Requestor	Date						
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