SONOMA MARIN AREA RAIL TRANSIT CALIFORNIA PUBLIC RECORDS ACT REQUEST FORM

Requested By:					(please	type or print)
Date:						
I prefer to be contacted	by:	Email				
		Telephone	()	<u>-</u>		
		US Mail				
DOCUMENT REQUEST	ED:					
Please provide as much de information that reasonably name, be as specific as potime frame and the subject	y describes the essible in descri	record(s) sough	nt. When a based on	record ca	nnot be ide	entified by
Are the documents reque Yes () No ()	ested being so (Optional)	ught for the pu	irpose of a	a claim oi	litigation?	>
If yes please indicate: Fi	rm Name					
Ca	se Name					
Ca	ase Number_			Court Loc	cation	
Please mail this Complet	ed form to:	Sonoma Ma Public Reco 5401 Old Re Petaluma, C	rds Act Co dwood H	oordinato	r `	¯)