

Oregon Government Ethics Commission (OGEC) Public Records Request

Requestor Information:

NAME OF REQUESTING INDIVIDUAL		ORGANIZATION
PHONE	FAX	E-MAIL
MAILING ADDRESS		
CITY	STATE	ZIP

Type of Record(s) Requested:

- SEI (Statement of Economic Interest)** – include name, position held, and year
- Lobbyist or Client/Employer of Lobbyist** – include name, calendar quarter, and year
- Investigative File** – include case number, names of parties, or other descriptive information that will assist in identifying the record
- Other:** _____

Description of Record(s): (Attach additional sheet if necessary)

I Prefer to Receive the Record(s):

- By e-mail to the e-mail address above
- By fax to the fax number above
- By U.S. mail to the mailing address above (additional charge for postage)
- In person (will pick up)
- I prefer to review the records in the OGEC office

SIGNATURE OF REQUESTING INDIVIDUAL	DATE
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Send completed and signed form to:
OGEC, 3218 Pringle Rd SE, Suite 220, Salem, OR 97302-1680
ogec.mail@oregon.gov
Fax: (503) 373-1456

FOR OFFICE USE ONLY

Estimate	Request Status	Payment Status
An estimate of \$ _____ (Amount) was provided on _____ (Date) by _____ (OGEC Staff)	<input type="checkbox"/> Authorization to proceed _____ (Date) <input type="checkbox"/> Information provided and request completed _____ (Date) <input type="checkbox"/> Other _____	Amount Received \$ _____ Date _____ <input type="checkbox"/> Cash <input type="checkbox"/> Check _____ (Number) <input type="checkbox"/> Other _____ (Detail)