

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 () _____ - _____
 US Mail _____

DOCUMENT REQUESTED:

Please provide as much detailed information as possible regarding the records you seek (e.g., information that reasonably describes the record(s) sought. When a record cannot be identified by name, be as specific as possible in describing the record, based on its content. If known, indicate a time frame and the subject matter or author of the record.

Are the documents requested being sought for the purpose of a claim or litigation?

Yes () No () (Optional)

If yes please indicate: Firm Name _____

Case Name _____

Case Number _____ Court Location _____

Please mail this Completed form to: Sonoma Marin Area Rail Transit (SMART)
 Public Records Act Coordinator
 5401 Old Redwood Highway, Suite 200
 Petaluma, CA 94954