



Request for Public Records

First Name: _____

Last Name: _____

Mailing Address: _____

City: _____

State: _____

Zip Code: _____

Please describe the records with as much detail as possible to help us find the records that you require:

Please initial the following options if you agree.

_____ If my request requires any payment to process, please contact me first.

_____ I agree to pay any fees due to the Fire District associated with my request. when I pick up the records. I understand that other associated fees (i.e. Missoula County Attorney) may be due before the request is fulfilled.

Please submit to: Seeley Lake Rural Fire District
Public Records Request
P.O. Box 309
Seeley Lake, MT 59868

Or Email to: SLFDChief@Blackfoot.net