## Spokane County Superior Court Request for External Review Re: Denial/Redaction of Requested Administrative Records

**Pursuant to GR 31.1(d)** 

<b>DATE:</b>			
Requestor Information:			
Printed Name:Last		First	MI
Last		1 1150	1711
Address: Street	City	State	Zip Code
Telephone:		Fax:	
E-mail Address:			
Signature:			
I request an external revi			lew and decision dated
Procedures: If the requesting party has requesting party may pursue methods:		•	
(1) The requesting party material civil action in superior	•	-	ion, or certiorari to file a

(2) The requesting party may seek informal review by a visiting judicial officer. The requesting

party shall submit a request in writing to Spokane County Superior Court Administrator to arrange for external review by a visiting judicial officer.

The external review process must be submitted within 30 calendar days of the decision issued from the internal review process.

The external review submission date is identified as the date a civil action is filed, or the date the Superior Court Administrator receives the request for external review.

- (1) The Public Records Officer will respond within five (5) working days from receipt of this administrative records request, unless this request is to a court that meets irregularly. In such case, the response to the request will be provided within thirty (30) calendar days of the request.
- (2) The procedures, the fee structure for providing records and the process for appealing the decisions of the Public Records Officer regarding exemptions, redaction and identification of the records can be found at <a href="http://www.spokanecounty.org/1140/Superior-Court">http://www.spokanecounty.org/1140/Superior-Court</a>. If you would like a printed copy of the procedures contact the public records officer using the information noted below.

## **Public Records Officer:**

Ashley Callan
Public Records Officer
Spokane Superior Court Administrator
1116 West Broadway Avenue
Spokane, Washington 99260
Phone Number: (509) 477-4400
Facsimile: (509) 477-5714

acallan@spokanecounty.org

Name:		Phone:	
Fax:		E-mail Address:	
Request Received:	at	a.m./p.m.	
Bv.			