



**State Records Center Request Fax**  
**Fax : 503-390-2312 Phone: 503-390-2258**

Agency: \_\_\_\_\_ Phone #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Send files attention to: \_\_\_\_\_

Delivery Address: \_\_\_\_\_

**FILE ITEMS REQUESTED**

Accession #: \_\_\_\_\_

File number: \_\_\_\_\_

File name: \_\_\_\_\_ Box #: \_\_\_\_\_

<i>Records Center Use Only</i>		
<i>Location:</i>	<i>Not found:</i>	<i>Date ent:</i>

Accession #: \_\_\_\_\_

File number: \_\_\_\_\_

File name: \_\_\_\_\_ Box #: \_\_\_\_\_

<i>Records Center Use Only</i>		
<i>Location:</i>	<i>Not found:</i>	<i>Date ent:</i>

Accession #: \_\_\_\_\_

File number: \_\_\_\_\_

File name: \_\_\_\_\_ Box #: \_\_\_\_\_

<i>Records Center Use Only</i>		
<i>Location:</i>	<i>Not found:</i>	<i>Date ent:</i>

Accession #: \_\_\_\_\_

File number: \_\_\_\_\_

File name: \_\_\_\_\_ Box #: \_\_\_\_\_

<i>Records Center Use Only</i>		
<i>Location:</i>	<i>Not found:</i>	<i>Date ent:</i>

Filled by: \_\_\_\_\_