

**County of Santa Clara**

**Public Records Request Form**

**Please Print Legibly**

Name of Requestor:	
Agency/Company: (if applicable)	
Address:	
Phone:	
Fax:	
Email:	
Indicate the Best Way to Reach You:	

**Requested Documents (Please be specific ) Please send your request to Christine Al Tamimi , Administrative Assistant, at [christine.altamimi@faf.sccgov.org](mailto:christine.altamimi@faf.sccgov.org). Thank you!**

<b>FOR COUNTY USE ONLY:</b>	
Date Received:	Initials:
Department Received:	
Date Submitted to Counsel:	