

Research Request for Quil Ceda Village Council Records

Requestor's full name			Date		
Email address			Phone number		
Reason for research reques	st:				
■ Work related — time s	sensitive?	☐ No ☐ Yes, dea	adline:		
Personal (Tribal memb	ers only)	— Tribal member ID	number:		
Other — explain:					
Select type of document you	are reques	sting: Minut	es Resolution	Other (e	xplain below)
Note: All requests will require a min weeks. We will call or email you wheeld of such information. I, the undersigned agree to tal beyond the above referenced not to use to intentionally, in a	imum of seven the docur effort is r t warrant liable for ke full resp	ren days to complete. If ments are ready for pick nade to provide cu the accuracy, con any losses caused consibility and reaso to of "Reason of for re	the documents are older than five up. Irrent documents responsive tent, or timeliness of any in by reliance on the accuracy onable precautions to preventes esearch request," not to use	years, it could ve to your oformation cy, reliabili	request, Quil obtained by this ty, or timeliness
Requestor's signature			Signature date		
QCV STAFF ONLY					
Do not have the following document(s):	Cannot provide copies of the record(s) requested due to:		The following document(s) have been approved and will allow copies to be made:	Other:	
Copies of document(s) request sent via		Date completed	Clerk's signature	<u> </u>	Entry No. 2588-801
Scan/email Pick up					