

**City and Borough of Sitka  
EMPLOYEE RECORDS REQUEST  
Records Center Check Out and Return Form**

To check out records from the CBS Records Center, please complete the following form and submit it to the Records Specialist, 747-1826, FAX: 747-7403, [melissa.henshaw@cityofsitka.org](mailto:melissa.henshaw@cityofsitka.org).

Date Requested: \_\_\_\_\_ Date Required: \_\_\_\_\_

Requested By: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

*For Records Center Use*

Record(s) Description with Date(s)	Date Delivered	Delivered By	Aisle	Section	Shelf	Box
Returned to Records Center on _____ by _____.						

