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Public Records Information Request Form

TO: RECORDS CUSTODIAN DATE: _____ I hereby request, pursuant to IDAHO CODE 74-102, to examine and/or copy the following public records: These records specifically pertain to myself. I wish to merely examine these records. I wish for copies of these records. Print Name: Mailing Address: Telephone:

I acknowledge by my signature that the records sought by this request will not be used for a mailing list of telephone list as set forth in Idaho Code 74-120