

**REQUEST TO EXAMINE/COPY
PUBLIC RECORDS**

TO: WASHINGTON COUNTY

DATE: _____

I hereby request; pursuant to Idaho Code Section 9-338, to examine and/or copy the following public records:

(SS 9-339) Must respond to request for record in 3 days – or 10 days.

These records specifically pertain to myself.

I wish to merely examine these records.

I wish copies of these records.

Print name:

Mailing address:

Telephone # and Area Code (_____)_____

Signature: _____

I acknowledge by my signature that the records sought by this request will not be used for a mailing list or telephone list as set forth in Idaho Code 9-348.