

# CITY OF HAUSER

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## REQUEST TO EXAMINE AND/OR COPY PUBLIC RECORDS

Date: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

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

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Please mark appropriate box(s):

- These records specifically pertain to myself
- I wish to merely examine these records
- I wish copies of these records

**NOTE:** There is no charge for the first 200 pages. Afterwards, the charge is \$0.15 per page. If staff time to retrieve requested documents is needed, there is no charge for the first two hours. Afterwards, staff time is charged at \$22.00 per hour.

Printed Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Signature: : \_\_\_\_\_

3.3

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

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