



Request to Examine / Copy Public Records

To: City Clerk

Date: _____

I hereby request, pursuant to Idaho Code §74-115, to examine and/or copy the following public records:

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

Print Name: _____

Mailing Address: _____

Telephone Number: (_____) _____ Fax: (_____) _____

Signature: _____ Email Address: _____

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.

Response Format Requested: Paper Fax Email

Received By: _____ Heyburn City Clerk/Deputy City Clerk

Date: _____ Time: _____