



REQUEST TO EXAMINE/COPY PUBLIC RECORDS

TO: Records Custodian - Boise County Treasurer

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 copies of these records.
- I wish electronic copies of these records.

Print Name: _____

Mailing Address: _____

Telephone No. () _____

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 § 74-120.

*Please submit all Public Record Requests to the Boise County Treasurer's Office
P.O. Box 1300, Idaho City, Idaho 83631.*