



# PUBLIC RECORDS REQUEST

To: City of Hailey  
115 Main St. S., Suite H  
Hailey, ID 83333  
PH: (208) 788-4221 / FAX: (208) 788-2924

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

\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_, 200\_\_\_\_\_

Print Name: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ FAX #: \_\_\_\_\_

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.

<i>City Use Only</i>	<i>Copying Costs Paid</i> \$ _____
<b>ACTION TAKEN</b>	<i>Mailing Costs Paid</i> \$ _____
Date Records Provided: _____	
How Records Provided: _____	
Date Three-Day Notice Mailed: _____	
Reason for Denial: _____	
_____	
_____	