

# WASHINGTON COUNTY

MATT A. THOMAS, Sheriff  
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## RECORDS REQUEST FORM

TO: Records Custodian

DATE: \_\_\_\_\_

I hereby request, pursuant to Idaho Code § 74-102, to examine and/or copy the following public records: Please include case number, date, location, type of incident and any subject involved, if known.

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

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

\* \* \* \* \*

For Office Use Only:  
Completed By: \_\_\_\_\_ Date: \_\_\_\_\_ Given In Person: \_\_\_\_\_ Mailed: \_\_\_\_\_ Faxed: \_\_\_\_\_ Other: \_\_\_\_\_