

CITY OF FRUITLAND

PO Box 324

Fruitland, Idaho 83619

fruitland.org

**PUBLIC RECORDS INFORMATION REQUEST FORM**

**In accordance with I.C.9-348, no agency or independent public body, corporate or political, may distribute or sell for use as a mailing list or a telephone number list any list of persons without first securing the permission of those on the list.**

I request to examine  [ ]  
copy  [ ] the following records:

---

---

---

---

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

Mailing address:

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

\_\_\_\_\_  
Date of Request

Phone: \_\_\_\_\_

Received by: \_\_\_\_\_

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

\_\_\_\_\_ **If initialed, more than three (3) working days are needed to locate or retrieve the requested records. A response shall be provided within ten (10) working days of the request.**

Payment received for \_\_\_\_\_ copies: \$ \_\_\_\_\_  
Amount Received Receipt No.