

## **PUBLIC INFORMATION REQUEST**

## ADA COUNTY CUUGUUQT)UOFFICE

190 E. Front Street, Suite 107

Boise, Idaho 83702

Phone: (208) 287-7200 • Fax: (208) 287-7209

## Please print or type legibly. Return form to the department listed above for processing.

Note: Section 9-348 of the Idaho Code does not permit Ada County to compile a list of persons that could be used as a mailing list.

Name:				Date:
Address:		Daytime Phone:		Fax Number:
				E-Mail:
City:		State:	Zip:	E-Maii:
Preferred Method of (Please note that e-mail is generally the m data may require that data be placed or e-mail may eliminate per page copying fee be paid in advance, includi	ost cost-effective me n CD or a similar dan es, however, will not	thod for deliver ta medium, resu eliminate fees c	ulting in fees as charged for staff	outlined below. Delivery by fime if applicable. Fees must
Requestor's Signature:	Note: Please be spec	ific, this may he	elp reduce reque	est completion time):
	FOR INTERNA	L USE ONLY	,	
Request Receipt & Department Request Co				ying & Staff Work Time Fees: aant to I.C. § 9-338(8)(a) & Ada County Resolution #1667
Request Recipient Date	Request Cor	//	(111)	$\frac{x \$.05 = \$}{\text{ges Copied}}$ $\frac{\text{Fee}}{\text{Fee}}$ st 10 pages are free)
Reviewer Date	Date Completed  Notification by:	Date Requestor Co		$\begin{array}{c} x \$1.25 = \$ \\ \hline \text{Os/Tapes Copied} \end{array}$
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Reviewer Date  Note: Some departments may choose to	Date Request Pic	eked Up or Sent	# Ho	x \$ = \$ ours Worked Rate Fee
have multiple reviewers.  Notes:				\$ Total Cost