

PIMA COUNTY ATTORNEY'S OFFICE

PUBLIC RECORDS REQUEST/NON-COMMERCIAL PURPOSE

Requesting Party's Name

Date

Phone Number

Email Address or Fax Number

Requesting Party's Address: _____

I request that the Pima County Attorney's Office: ___ allow inspection of or ___ provide a copy or other reproduction of the public records listed below. ***(Please give a detailed description. If known, give the document name, page numbers, case name or number, or other pertinent information where applicable. Attach an additional 8.5" x 11" sheet, if needed.)***

The records requested are to be used for a non-commercial purpose. If the records are to be used for commercial purposes, please use the form titled **PUBLIC RECORDS REQUEST - COMMERCIAL PURPOSE**.

Certification

I certify that all the information provided is true and correct under penalty of perjury. I declare that I have read the Information and Instructions Pamphlet accompanying this form and understand its contents. I declare that the copies or reproductions of the public records which I have requested will be used solely a non-commercial purpose. Prior to obtaining copies of the documents requested, I agree to pay the fee assessed at the rate of:

- o \$0.35 per page and \$10.00 an hour for copying time for paper copies;
- o \$5.00 per CD and \$10.00 an hour for downloading for documents in electronic format; and/or
- o The actual cost of the medium and the reproduction, for information in any other reproduction format.

I certify that the copies or reproductions of the public records which I have requested will be used solely for non-commercial purposes. I certify that the copies or reproductions will not be used directly or indirectly for any purpose other than that described nor will I transmit or resell the records to any other person or entity without specific authorization of the County Attorney's records custodian.

Requesting Party's Signature