



306 5th Avenue West, Gooding, Idaho 83330  
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[goodingpubliclibrary@gmail.com](mailto:goodingpubliclibrary@gmail.com)

## REQUEST FOR PUBLIC RECORDS

To request public records, please fill out the form below and submit in person, by mail, or Email attachment to [goodingpubliclibrary@gmail.com](mailto:goodingpubliclibrary@gmail.com). Alternatively, you may fill out our online form at [goodingpubliclibrary@gmail.com/records-request-form](mailto:goodingpubliclibrary@gmail.com/records-request-form).

Gooding Public Library District is a public entity and as such, disclosure of public records is governed by Idaho Code. Please see our Public Records Policy for more details on exemptions, procedures, and applicable fees.

Request Date:	
Full Name:	

I hereby request, pursuant to Idaho Code § 74-102, to examine and/or copy the following public records:

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Records Use (check all that apply):

How would you like to receive the records?

- These records specifically pertain to myself.
- I wish to merely examine these records.
- I request copies of these records.

- Email
- Printed and mailed
- Printed for pickup

Mailing address:	Email address:
	Phone number:

**I acknowledge that the records sought by this request will not be used for a mailing list or telephone list as set for in Idaho Code § 74-120.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date