

CUSTOMIZED – Public Record Request

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(Company Name) (Address) which is engaged in the business of	(Name)		(Title)	_
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(Nature of Business) If am requesting the following information: (State records being requested. Be specific. Use additional sheets if needed.) If certify that all information provided is true and correct. I agree to pay the fee or deposit of \$_0.00 for these records. I also agree that the public records will not be transmitted or resold to any other person or entity without specific authorization from the County's record custodian. I agree to delete all data acquired via this equest from my databases and all other electronic media forms upon completion of the purpose or use for which his request is made. I agree not to hold Maricopa County liable for any inaccurate or incomplete information I may receive. (See disclaimer on reverse side.) If fully understand that the Arizona Public Records Act does not require Maricopa County to fulfill mon-standard or custom request for data. I agree not to hold Maricopa County liable for an inaccurate or incomplete information I may receive. Date	(Company Name)	,	(Address)	
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