

# Cherry County Records Request Form

## Requester Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address City State ZIP Code*

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

## Record(s) Requested

Describe the record(s) you are requesting. Please be as specific as possible and include enough detail to assist Cherry County staff in locating the record(s). For multiple records, attach additional page(s).

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## Format of Record(s)

Please specify the preferred format of record(s). **\*\*Format availability varies by record\*\***

**Paper copy** (\$.25 per page for black and white) ☐ **Visual Inspection** (Public inspection area will vary by office.) ☐

**Digital record(s)** (no charge) ☐ **Certified copy (County Clerk, ROD)** (\$1.50 additional per page SS 33-109) ☐

## Disclaimer and Signature

*By signing below I certify that the above information IS true and correct to the best of my knowledge.*

Signature of Requesting Individual: \_\_\_\_\_ Date: \_\_\_\_\_

## -----Cherry County Staff Use Only-----

Date request received: \_\_\_\_\_ By: \_\_\_\_\_

### Estimate status (if applicable)

An estimate of \$ \_\_\_\_\_

Was provided on \_\_\_\_\_

By \_\_\_\_\_

### Payment Status (if applicable)

Amount Received \$ \_\_\_\_\_

### Request Status

☐ Authorization to Proceed

☐ Request Withdrawn

☐ Information provided and request completed

☐ Information not provided – law excludes  
information requested

☐ Other \_\_\_\_\_