

VERIFIED STATEMENT OF COMMERCIAL PURPOSE

Public Record Request



To: \_\_\_\_\_ [Designate Record Custodian]

Caution: Arizona Revised Statutes § 39-121.03(C) provides:

"A person who obtains public records for a commercial purpose without indicating the commercial purpose or who obtains a public record for a noncommercial purpose and uses or knowingly allows the uses of such public record for a commercial purpose or who obtains a public record for a commercial purpose and uses or knowingly allows the use of such public record for a different commercial purpose or who obtains a public record from anyone other than the custodian of such records and uses them for a commercial purpose shall in addition to other penalties be liable to the state or the political subdivision from which the public record was obtained for damages in the amount of three times the amount which would have been charged for the public record had the commercial purpose been stated plus costs and reasonable attorneys' fees or shall be liable to the state or the political subdivision for the amount of three times the actual damages if it can be shown that the public record would not have been provided had the commercial purpose of actual use been stated at the time of obtaining the records."

A commercial purpose is defined by Arizona Statute as the use of a public record for the purpose of:

- the sale or resale or for the purpose of producing a document containing all or part of the copy, printout, or photograph for sale, or
• obtaining of names and addresses from such public records for the purpose of solicitation, or
• for any purpose in which the purchaser can reasonably anticipate the receipt of monetary gain from the direct or indirect use of such public records.

VERIFIED STATEMENT

I, \_\_\_\_\_, am the \_\_\_\_\_, of \_\_\_\_\_
(Name) (Title) (Company Name)

located at \_\_\_\_\_, which is engaged in the business of \_\_\_\_\_
(Address) (Nature of Business)

I am requesting to [ ] inspect or [ ] reproduce the following public record(s) of Gila County: \_\_\_\_\_

(State record being requested. Be specific. Use additional sheets if needed.)

I do hereby certify that the public records, which I have requested, are for the following purpose(s): \_\_\_\_\_

I certify that all information provided is true and correct and I agree to pay the fee or deposit of \$ \_\_\_\_\_ for these records.

Applicant's Signature

Date

STATE OF ARIZONA )
County of Gila ) ss.

Notary Public

Date Commission Expires

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Page 2 of 2 Pages

**CONTACT INFORMATION:**

Name: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

**DISCLAIMER - INDEMNIFICATION**

Requester understands and agrees that Gila County does not guarantee the accuracy of the data and information requested and hereby expressly disclaims any responsibility for the truth, lack of truth, validity, invalidity, accuracy, or inaccuracy of said data and information. Requester agrees to indemnify Gila County, its officers and employees from any liability which may arise from the Requester's unauthorized use or transmission of any such data or information in its actual or altered form.