



ARIZONA BOARD OF EXECUTIVE CLEMENCY  
 1645 W. JEFFERSON, SUITE 101  
 PHOENIX, AZ 85007

**RECORDS REQUEST FORM**

Date Requested \_\_\_\_\_ Requestor \_\_\_\_\_  
 Address \_\_\_\_\_ Phone # \_\_\_\_\_  
 \_\_\_\_\_ Fax # \_\_\_\_\_  
 \_\_\_\_\_

**Pursuant to A.R.S. § 35-131; 35-193 Payment in exact cash or check only\*\*\***

Pursuant to Arizona Revised Statute 39-121.01, I request a copy of the above record from the Arizona Board of Executive Clemency.

I certify the requested information *will* be used for commercial purposes as defined in ARS 39-121.03 (D). State the exact purpose below or attach separate statement.

**ARIZONA REVISED STATUTE SECTION 39-121.03**

D. As used in this section "commercial purpose" means the use of a public record for the purpose of sale or resale or for the purpose of producing a document containing all or part of the copy, printout or photograph for sale or the obtaining of names and addresses from such public records for the purpose of solicitation or the sale of such names and addresses to another 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 record. Commercial purpose does not mean the use of a public record as evidence or as research for evidence in an action in a judicial or quasi-judicial body of this state or a political subdivision of this state.

Printed Name of Requestor \_\_\_\_\_  
 Signature of Requestor \_\_\_\_\_ Date \_\_\_\_\_

**For Board Office Use Only**

# of pages to be copied \_\_\_\_\_ # of audio files to be copied: \_\_\_\_\_ Loc: \_\_\_\_\_ Panel: \_\_\_\_\_  
 # of video tapes to be copied: \_\_\_\_\_ Mailing Cost: \_\_\_\_\_ TOTAL QUOTED COST \$ \_\_\_\_\_  
 REQUEST TAKEN BY: \_\_\_\_\_ DATE: \_\_\_\_\_  
 Signature of person approving release of requested record \_\_\_\_\_ Date Approved \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

Total Fee Received: \_\_\_\_\_ Date: \_\_\_\_\_  
 Cash \_\_\_\_\_  Check/Money Order # \_\_\_\_\_  
 Rec'd by (Board staff signature required) \_\_\_\_\_  
 Date sent Bus. Mgr. (or designee): \_\_\_\_\_  
 # of pages copied: \_\_\_\_\_. \_\_\_\_\_. \_\_\_\_\_. #..of audio file copied: \_\_\_\_\_  
 Date record(s) mailed: \_\_\_\_\_ - Other: \_\_\_\_\_  
 \_\_\_\_\_

**FEE SCHEDULE**

Photocopy of any record \$ .25 per page  
 Duplicate of any audio file \$5.00 per tape  
 CD duplicate of any audio file \$5.00 per CD

ALL MAILING COSTS WILL BE AT THE CURRENT POSTAL RATE.

Records Received by (NAME AND DATE): \_\_\_\_\_