



**Verified Statement of Non-Commercial Purpose
Public Data Request**

**Yavapai County Government
1015 Fair Street
Prescott, Arizona 86305**

Request should be directed to the specific department to which the information is being requested from

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 use 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 attorney’s 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.”

Record(s) requested: _____

List all requested information. The request must be legible and specific. Use additional sheet(s) if necessary.

Verified Statement

I hereby affirm that the public records I have requested are not for a “commercial purpose” as defined by A.R.S. §39-121.03. I also hereby agree that the public records will not be transmitted or sold to any other person for a commercial purpose.

Print Name (Must be legible)

Date

Address (Please print – must be legible)

E-mail address (optional)

Contact phone number

OFFICE USE ONLY

Paper copies

Electronic copies

Number of pages: _____

CD/Tape recording: _____

Paper size: _____

Other: _____

Total cost: _____

Date received: _____

Date completed: _____

Employee initial _____