

# NEOSHO COUNTY KANSAS

## REQUEST FOR RECORD INSPECTION

### Requesting Party's Identification Information

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

### **CERTIFICATE OF COMPLIANCE WITH K.S.A. 45-220(C); K.S.A. 45-230**

I, \_\_\_\_\_, understand that no person shall receive, for the purpose of selling or offering for sale any property or service to persons listed herein, any list of names or addresses contained in or derived from a public record.

I also understand that violation of the statute prohibiting the unlawful use of names derived from a public record shall subject me to payment of a civil penalty in a sum set by the court not to exceed \$500 for each violation.

In accordance with these provisions, I certify that I do not intend to, and will not, use any list of names or addresses contained in or derived from public records for the purpose of selling or offering for sale any property or service to any person listed or to any person who resides at any address listed; neither will sell, give, or otherwise make available to any person any list names or addresses contained in or derived from the records or information for the purpose of allowing that person to sell or offer for sale any property or service to any person listed or to any person who resides at any address listed, except under authority of the limited circumstances provided in K.S.A. 45-220.

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Name (please print)

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Signature

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Date