Macon County Sheriff's Office

REQUEST FOR PUBLIC RECORD

Requests must be made in writing. Requests may be submitted by mail, fax, email or personal delivery.

Submit requests to:

Jon Butts FOI Officer 333 S. Franklin St. Decatur, IL 62523

Phone: (217) 424-1321 Fax: (217) 424-6010

Email: jbutts@sheriff-macon-il.us

FOIA Request No
Received:
Response Due:
Extended Response Due Date
(if applicable):
FOI Officer:

FOR OFFICIAL USE ONLY - DO NOT WRITE IN THIS BOX

REQUESTER'S CONTACT INFORMATION					
Last Name	First Name		Middle Initial	Date of Birth	
Address	City	State	ZIP	Phone No.	
Email					
RECORDS REQUES	<u>TED</u>				
Identify or describe the	e record you are requesting.	Be as specif	ic as possible.		
ADDITIONAL INFOR	<u>MATION</u>				
"Commercial purpose" m form for sale, resale, or s media and non-profit, sci the principal purpose of t (ii) for articles of opinion	cords for a commercial purpo eans the use of any part of a public olicitation or advertisement for sale entific, or academic organizations s he request is (i) to access and disse or features of interest to the public, /FUL TO OBTAIN A PUBLIC RECO MERCIAL PURPOSE.	record or record s or services. For hall not be consided eminate information (iii) for the purport	s, or information deriver purposes of this defined to be made for on concerning news apose of academic, so	inition, requests made by news a "commercial purpose" when and current or passing events, ientific, or public research or	
Are you requesting yo	ur own records?		Yes	No	
Are you requesting a f	ee waiver?		Yes	No	
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Generally, a response to your request will be made within 5 working days of receipt of your request. If a longer response time is necessary, requesters will be notified as required by the Freedom of Information Act.